C.C.T.I

Chanda Computer Training Institute

UNDER WB GOVERNMENT & INDIA GOVERNMENT REGD.

Head Office : Halisahar Sarkar Bazar, P.O. : Nabanagar, Dist. : 24 Pgs. (N)

PHOTO

ADMISSION FORM

Applicant's Name : (Block Letter)

Date of Birth : Sex : M F

Father's /Guardian's Name :

Address :

PIN :

Contact No. : 1. 2.

Nationality : Religion :

Educational Qualification :

Other Qualification :

Previous Computer Knowledge :

Name of the Training Course opted :

Name of the C.C.T.I. Center :

DECLARATION

1) I do hereby declare that the information mentioned above are true.

2) I declare that I should abide by all the rules and regulations of C.C.I.T.

Place :.....

Date : .....

Signature of Guardian

Signature of Student

For Office Use Only

Date of admission :.....Duration.....

Day's / Week / Hour's .....Course Fee..... + Registration Fee.....

Concession Source .....Remarks .....

Date : .....

Signature of Center Incharge

Note : Without Institute's seal on this form, it is invalid.