



BHARAT SKILL DEVELOPMENT EDUCATION & TRAINING

AN ISO 9001:2015 CERTIFIED ORGANIZATION

(REGD. No-IV - 190305830 OF 2018)

Governed by Bharat skill development center

Govt. of west Bengal & Govt. of India Registered)

(An autonomous Organization under Govt. of West Bengal based on TR 1882 (Govt. of India), Associated with National Institution for Transforming India, NITI Aayog (Govt. of India), Dept. of Labour NCT Delhi (Govt. of India), C. R. Act- Ministry of Commerce & Industry (Govt. of India), Ministry of Small and Medium Enterprises (Govt. of India) Central Social Welfare Board and Certified by Central Vigilance Commission)

REGISTRATION FORM

ALL COLUMNS ARE TO BE FILLED IN CAPITAL LETTERS WITH BLACK/ BLUE INK

1.	CENTRE NAME		
2.	CENTRE CODE		
3.	Course Name		
		Date of admission	Exam year
7	Name of applicant		

8.	C/O	
9.	Mother's Name	
10.	Date of Birth	
11.	.Address	
	Pin no	
12 .	. Mobile	
13 .	.Email	
14.	Educational Qualification	
15 .	. Extra Qualification	
I de und according from Feet be I sh	eclare that I have heard the all positive and negative side derstood this fully. I am Seeking Admission into this Institution with consent of my Guardian/Employer/ office. I gree to abide by the rules, policies, by laws and Regulation time to time & Guarantee of success cannot be given be sonce paid by me will not be refunded under any circum responsible for delay of Examination. I hall not withdraw my admission in any case. I hall personally appear in the Examination. The institution garding Mark-sheet and certificate issued by the Board/eis information given above is true to the best of my known	e of this courses and itution on my own interest & ons of this Institution Change by this Institution. Instances& Institution will not in has no responsibility council/University.
	 Inature of the Centre in-charge te	Signature of the Applicant

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