भारत सरकार / Government of India अंतरिक्ष विभाग / Department of Space

विक्रम साराभाई अंतरिक्ष केंद्र / VIKRAM SARABHAI SPACE CENTRE

तिरुवनंतपुरम / Thiruvananthapuram-695022

Photo

APPLICATION FOR GRADUATE APPRENTICESHIP TRAINING (To be filled by the applicant)

B.E./B.Tech. Branch		·
A	pplication Reference	: Walk In Interview
1.	Name in full (in BLOCK letters)	:
2.	Date of birth (in Christian Era)	f
3.	Sex: Male/Female	4. Marital Status: Married/ Unmarried
5.	(a) Nationality:	(b) Religion:
6.	Are you a member of Scheduled Caste/ Scheduled Tribe/ OBC/Physically Handicar If yes, please tick the appropriate column as Statement must be supported with authentic copy of necessary certificates.	nd your SC ST OBC PH
7.	(a) Permanent Address:	(b) Present Address:
	Pin	Pin
	Phone:	Mob:
	F-mail id:	

8. Details of qualifications (beginning from SSLC or equivalent)*

Examinations passed	Institution/University	Year of Passing	Subjects taken	CGPA/Percentage of marks, Class and Distinction if any	
			-		

9. Details of experience and Apprenticeship training undergone/ undergoing if any:

(Persons who have undergone/are undergoing one year apprenticeship training under Apprentices Act are not eligible to be considered as Apprentice again)

Name of organization (also state whether Govt.	Designation	Pay(Rs)	Nature of Duties	Period of Employment/Training		Reasons
/ Semi Govt. / Private etc.)				From	То	for leaving
						W
			-			

- 10. Have you ever been arrested or detained or prosecuted by Police or punished for any offence or misconduct by a Court of Law? OR, is there any proceedings pending against you in any Court of Law? If so, give details:
- 11. Any other relevant information you wish to add including references:

DECLARATION

I affirm that the information given in this application is true and correct. I also fully understand that if at any stage, it is discovered that any attempt has been made by me to willfully conceal or misrepresent the facts, my candidature may be summarily rejected or my apprenticeship training terminated.

Date:

Signature of Candidate

*Self-Attested true copy of certificates/ Mark lists in proof of these entries should be submitted along with this application.