Application Form for Apprenticeship Training in MeECL

Date of Birth: -			
Year	Month	Date	
Place of Birth: -			
Village / Town	Police Station	District	State
Father's / Mother's (Please do not use			
A. Permanent Addr	ress in full:	B. Present Address	in full:
			<u>·</u>
Contact Number			
Contact Number:	Lunch and		
Alternate Contact N			
Alternate Contact N	Number:	al Streams]:	
Alternate Contact N		al Streams]:	
Alternate Contact N	lied for [Degree in General	al Streams]:	
Alternate Contact N	lied for [Degree in General		
Alternate Contact N Apprenticeship appi Educational Quali	lied for [Degree in General		
Alternate Contact N Apprenticeship app Educational Quali (i) Name of In (ii) Date of Pa	lied for [Degree in General (BA/B)) fications: astitution & Address: assing [2020/2021/2022];		ar 2020 are not eligible)