APPLICATION FORM FOR APPRENTICESHIP at INMAS Delhi

Advt. No. INMAS/RAC/APPR-02/2024-25

SUBJECT (in specialisation) (Tick any one): B.Sc./B.Pharma/B.L.I.Sc./Diploma L.I.Sc.

1.	Name (in BLOCI	K LETTERS)						
2.	Apprentice Category		(Graduate/ Technician Apprentice)					
3.	NATS Registration/ Enrolment No.			,		D1		
4.	Father's Name					Photo (Self-Attested)		
5.	Gender (M/F/O							
6.	Category: SC/S7	T/OBC/Gen						
7.	Aadhar Card No							
8.	Date of Birth/Age		Years:		Months:	Days:		
9.	Correspondence Address							
10.	Permanent address							
11.	Phone/Mobile No.							
12.	Email ID							
13.	Education qualification (in chronological order). Self-attested copies to be enclosed							
Sl. No	Examination/ Degree	Board/ Un	niversity	Subject	Year of Passing	% Marks	Division/ Class	
Declaration:								
I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I								
	understand that in the event of my information being found false or incorrect at any stage, my candidature / appointment shall be liable to cancellation / termination without notice or any compensation in lieu thereof.							
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Place:	
Date:	(Signature of the applicant)

List of enclosures:

- 1.
- 2.
- 3.
- 4.

(Note: - Application should be submitted in typed format and hand written application will be summarily rejected)