

DAY-NULM
Employment through Skill Training and Placement [EST&P]
 Applicant Registration Form
 (For the candidates selected for enrollment in a Skill Training Centre)

Candidate Name:													
Sex:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Male</td> <td style="width: 25%;"></td> <td style="width: 25%;">Female</td> <td style="width: 25%;"></td> <td style="width: 25%;">TG</td> <td style="width: 25%;"></td> </tr> </table>	Male		Female		TG							
Male		Female		TG									
Age:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 55%;">Date of birth (DD-MM-YYYY)</td> <td style="width: 30%;"></td> </tr> </table>		Date of birth (DD-MM-YYYY)										
	Date of birth (DD-MM-YYYY)												
Father/Spouse Name:													
Mother Name:													
Religion:													
Caste:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">SC</td> <td style="width: 25%;"></td> <td style="width: 25%;">ST</td> <td style="width: 25%;"></td> <td style="width: 25%;">OBC</td> <td style="width: 25%;"></td> <td style="width: 25%;">Others</td> <td style="width: 25%;"></td> </tr> </table>	SC		ST		OBC		Others					
SC		ST		OBC		Others							
Whether belongs to Minority category:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;"></td> <td style="width: 50%;">No</td> <td style="width: 50%;"></td> </tr> </table>	Yes		No									
Yes		No											
Minority category:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Muslim</td> <td style="width: 25%;"></td> <td style="width: 25%;">Sikh</td> <td style="width: 25%;"></td> <td style="width: 25%;">Christian</td> <td style="width: 25%;"></td> </tr> <tr> <td>Jain</td> <td></td> <td>Buddhist</td> <td></td> <td>Parsis</td> <td></td> </tr> </table>	Muslim		Sikh		Christian		Jain		Buddhist		Parsis	
Muslim		Sikh		Christian									
Jain		Buddhist		Parsis									
Area / Place:													
Ward number:													
Ward name:													
Address:													
District:													
Pincode:													

Loksabha Constituency:							
Phone number:	<input type="text"/>						
Mobile number:	<input type="text"/>						
Email ID:	<input type="text"/>						
Highest Educational Qualification:	<input type="text"/>						
Possess Technical Education:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>		
Yes	<input type="text"/>	No	<input type="text"/>				
Previous work experience (No. of years)	<table border="1"> <tr> <td><input type="text"/></td> <td>Monthly Income (In Rs.):</td> <td><input type="text"/></td> </tr> </table>	<input type="text"/>	Monthly Income (In Rs.):	<input type="text"/>			
<input type="text"/>	Monthly Income (In Rs.):	<input type="text"/>					
Aadhar Number:	<input type="text"/>						
ID Type:	<input type="text"/>						
ID Number:	<input type="text"/>						
Bank Name:	<input type="text"/>						
Branch Name:	<input type="text"/>						
Bank Account Number:	<input type="text"/>						
IFSC Code:	<input type="text"/>						
PWD:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>		
Yes	<input type="text"/>	No	<input type="text"/>				
Type of Disability:							
Street vendor:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>		
Yes	<input type="text"/>	No	<input type="text"/>				
Homeless:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>		
Yes	<input type="text"/>	No	<input type="text"/>				
Insurance cover:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>		
Yes	<input type="text"/>	No	<input type="text"/>				
Insurance through:							
Whether BPL or not:	<table border="1"> <tr> <td>Yes</td> <td><input type="text"/></td> <td>No</td> <td><input type="text"/></td> <td>BPL No:</td> <td><input type="text"/></td> </tr> </table>	Yes	<input type="text"/>	No	<input type="text"/>	BPL No:	<input type="text"/>
Yes	<input type="text"/>	No	<input type="text"/>	BPL No:	<input type="text"/>		

For office use only

Bank account opened by:	<table border="1"><tr><td>STP</td><td></td><td>Self</td><td></td></tr></table>	STP		Self	
STP		Self			
Residential candidate:	<table border="1"><tr><td>Yes</td><td></td><td>No</td><td></td></tr></table>	Yes		No	
Yes		No			
Distance between residence & training centre:	<table border="1"><tr><td></td><td>Kilometers</td></tr></table>		Kilometers		
	Kilometers				
Eligible for transport cost:	<table border="1"><tr><td>Yes</td><td></td><td>No</td><td></td></tr></table>	Yes		No	
Yes		No			
Eligible for conveyance:	<table border="1"><tr><td>Yes</td><td></td><td>No</td><td></td></tr></table>	Yes		No	
Yes		No			
Eligible for boarding:	<table border="1"><tr><td>Yes</td><td></td><td>No</td><td></td></tr></table>	Yes		No	
Yes		No			