



### Registration Form

**Position Looking for:**

|    |    |    |
|----|----|----|
| 1. | 2. | 3. |
|----|----|----|

**Educational Qualifications:**

| Name of School/College | Major Subjects | Start-Complete Date | Type of Degree | Marks |
|------------------------|----------------|---------------------|----------------|-------|
|                        |                |                     |                |       |
|                        |                |                     |                |       |
|                        |                |                     |                |       |

**Experience (If any):**

| Employers Name | Position | Responsibilities | Duration (From/To) | Reason to Leaving |
|----------------|----------|------------------|--------------------|-------------------|
|                |          |                  |                    |                   |
|                |          |                  |                    |                   |

**Training/Workshop/Seminars attended:**

| Name/Title | Key Subject | Date/Venue |
|------------|-------------|------------|
|            |             |            |
|            |             |            |

**Language Ability:**

| Language | Speak |      |           | Read |      |           | Write |      |           |
|----------|-------|------|-----------|------|------|-----------|-------|------|-----------|
|          | Fair  | Good | Excellent | Fair | Good | Excellent | Fair  | Good | Excellent |
|          |       |      |           |      |      |           |       |      |           |
|          |       |      |           |      |      |           |       |      |           |
|          |       |      |           |      |      |           |       |      |           |

**Expected Salary / Remuneration:**

|              |                   |
|--------------|-------------------|
| In Training: | At Probation:     |
| For Regular: | For Project Base: |

**Personal Information:**

|                  |      |                     |  |
|------------------|------|---------------------|--|
| Name:            |      | Surname:            |  |
| Religion:        |      | Nationality:        |  |
| Date of Birth:   | Age: | M/F:                |  |
| Aadhaar Card No: |      | Driving License No: |  |

**Contact Address:**

|            |            |
|------------|------------|
| Permanent  | Present    |
| Mobile No: | Mobile No: |
| E Mail:    | E Mail:    |