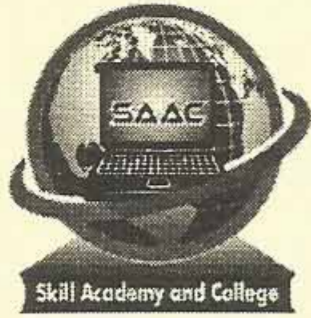


An ISO 9001:2008 Certified Institution



SKILL ACADEMY & COLLEGE



ISO 9001-2008 Certified Institution

Registration Form

Form No.....

Student's Name :



Father's Name :

Contact No. : /

Date of Birth : Category :

Permanent Address :

Local Address :

Training Period : Admission Receipt No. :

Educational Qualification :

Class	Board	Place/District	Class	Board	Place/District
10 th			12 th		
GRAD.			Other		

Course Duration

Parent's Signature

For Office Use Only

Total Course Fee : Deposited (Rs.) :

Fee Schedule : Monthly (Rs.) / One Time (Rs.) :

Any Other :

Batch Time :

Authorised Signatory

Student's Signature