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SWADESHI SARVA COMPUTER SHIKSHA ABHIYAN

A National Computer Awareness Programme

(An Autonomous Institution Registered Under the Society & Public Trust Act- Govt. of India, N.C.T. New Dehli)

An ISO 9001:2000 Certified Institution

REGISTRATION FORM

Fill the form in BLOCK CAPITAL LETTERS (English) using BLUE/BLACK ink only.

ASO CODE STATE CODE

Course Name Course Code

Space for
Photograph
Paste one recent
passport size
photograph preferably
black & White
Please do not pin
or Staple

1. Full Name of the Applicant (as per certificate)

2. Father's Name (as per certificate)

3. Complete Address for Correspondence to (do not repeat name)

State

Pin Code

Telephone Number with STD Code

4. Category
 ST SC Handicapped Other

5. Date of Birth

6. Sex
 M-Male
 F-Female

7. Courseware Medium
 E- English
 H- Hindi

8. Detail of Qualifying Examination

	Name of Board / University	College/ School Name	Year of Passing	% Obtained
SSC				
Inter				
Degree				
Others				

Enclosure : Demand Draft, Attested Zerox copy of last qualification & Cast Certificate

DECLARATION BY THE APPLICANT

I have read all the rules and regulation of the institute and admission to the course applied for. I declare that the above information is true and correct to my knowledge and belief and I fully understand that my admission will stan cancelled if any information by me is found to be false or twisted.

Place :

Date :

FOR ASC OFFICE USE ONLY

Signature of Applicant

From Receiving Date

Enrollment No.

Authorised Signatory