



पी. एम. श्री. केन्द्रीय विद्यालय क्र. 1 भा. प्रौ. संस्थान खड़गपुर  
PM Shree Kendriya Vidyalaya No. 1 IIT KHARAGPUR



**Registration Form - Domestic Data Entry Operator Batch 2 (Skill Hub initiative)**

Date: 16 Nov 2023

Ser No	Particulars													
1.	Name of Candidates	<input type="text"/>												
2.	Father's Name	<input type="text"/>												
3.	Mother's Name	<input type="text"/>												
4.	Name of Spouse	<input type="text"/>												
5.	Aadhar No	<input type="text"/>												
6.	Date of Birth	<input type="text"/>												
7.	Educational Qualification :-	<table border="1"> <tr> <td>(a)</td> <td>Class Last Studies (highest )</td> <td><input type="text"/></td> </tr> <tr> <td>(b)</td> <td>Year of Passing/Discontinued</td> <td><input type="text"/></td> </tr> <tr> <td>(c)</td> <td>Subject Studied</td> <td><input type="text"/></td> </tr> <tr> <td>(d)</td> <td>Full Address of School</td> <td><input type="text"/></td> </tr> </table>	(a)	Class Last Studies (highest )	<input type="text"/>	(b)	Year of Passing/Discontinued	<input type="text"/>	(c)	Subject Studied	<input type="text"/>	(d)	Full Address of School	<input type="text"/>
(a)	Class Last Studies (highest )	<input type="text"/>												
(b)	Year of Passing/Discontinued	<input type="text"/>												
(c)	Subject Studied	<input type="text"/>												
(d)	Full Address of School	<input type="text"/>												
8.	Present Occupation	<input type="text"/>												
9.	Local Address	<input type="text"/>												
		<input type="text"/>												
		<input type="text"/>												
	State	Pin Code <input type="text"/>												
10.	Permanent Address	<input type="text"/>												
		<input type="text"/>												
		<input type="text"/>												
	State	Pin Code <input type="text"/>												
11.	Email	<input type="text"/>												
12.	Mobile No	<input type="text"/>												
13.	PAN No	<input type="text"/>												

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Size Photo

**Declaration :**

I hereby declare that all the information particulars given are true to the best of my knowledge and belief. I know that if any information is found incorrect in future, my selection may be cancelled automatically.

Date :   
Place :

Signature   
Name