**Rajiv Gandhi Education Foundation**

***(Assessing Body under Skill Development Initiative Scheme***

***by Ministry of* Skill Development and Entrepreneurship, Govt. of India*)***

**Madayikonam Post, Thrissur, Kerala, Pin 680 712**

**Application Form for Registration of Vocational Training Institute**

I **Details of Applicant ( Owner / Head of the Institute)**

1. Name: …………………………………………………… Date of Birth: ……………...................
2. Residential Address:

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1. Tele No: …………………. Mobile No: …………………… e-mail id: …………………………
2. Educational Qualification ………………………………………………………………………….

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1. No. of years of experience in training ……………………………………………………………...

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**II**  **Details of the Institute**

1. Name and complete address of the institute: …………………………………………………………...

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2. Year of establishment: ……………………………………………………………………………………

3. Postal address: ……………………………………………………………………………………………

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4. Phone number: …………………………………… e- mail id:……………………………………….

5. Courses for which assessments are to be conducted by RGEF:

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6. Subjects covered (Attach brief syllabus with hours of teaching in both Theory and Practical)

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Declaration: -
I do hereby declare that the above given statements are true and correct to the best of my knowledge.

Place: ………………………... Signature :

Date: ………………………….. Name :

 Seal of the institute: