



ASMACS

Industrial Training Centre

Nischintakolli, Cuttack - 754 207, Ph.: 0671-2535668

E-mail: asmacsitc@asmacs.net

ADMISSION FORM

Please affix your photograph

FOR OFFICE USE ONLY

Admission Sl No _____ Date _____

Qualification _____

Trade Allotted _____

Signature of the Verifying Officer

(To be filled by candidate in his/her own handwriting)

1. Choice of Trade (put the Tick Mark)

FITTER	
ELECTRICIAN	
PLUMBER	

2. Name of the Applicant (in Block letter)

3. Sex (Put Tick Mark : Male Female

4. Category : Gen/SC/ST/PH/OBC/Ex-M/GC/Minonty

5. Date of Birth (As recorded in high School Certificate)

In words

6. Mother's Name (In Block Letters)

7. Father's Name (In Block Letters)

8. Guardian Name if Father is not alive (In Block Letters)

9. Present Address

Permanent Address

(in Block Letters)

(In Block Letter)

Al-	Al
P.O.	P.O.
P.S.	P.S.
Dist.-	Dist-
Pin-	Pin-
Phone-	Phone-

10 Academic particulars of the Candidate : attested Xerox Copy of the certificate must be attached

Examination Passed	University/Board	Year of Passing	Total Mark	Marks Obtained	% of Marks	Remarks

11 Do you want to stay in I.T.C. Hostel ? Put Tick Mark

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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12 Do you have any chronic disease ? Put Tick Mark

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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is yes, mention in detail _____

13. Blood Group _____

14. Details of Hobbies & extra curricular activities _____

(Declaration by the Student)

I declare that the particulars furnished by me in this form are true to the best of my knowledge of my knowledge. I also promise that I will abide by the rules and regulation of the institute.

Date : _____

Place : _____

Signature of the Applicant

Declaration by the guardian

I shall bear all the expenses of my ward his/her study in ASMACS-ITC I shall immerses upon my ward to abide by the rules and regulations of the institute. I shall also accept the punishment given to his/her for any act indiscipline.

Date : _____

Place : _____

Signature of the guardian