

ENROLLMENT FORM

PASTE
(DO NOT STAPLE)
RECENT
PASSPORT SIZE
PHOTOGRAPH

NAME _____
TO BE FILLED IN BLOCK CAPITALS AS REQUIRED ON THE CERTIFICATE

F/NAME _____

DATE OF BIRTH _____ GENDER MALE / FEMALE
DD / MM / YYYY

EDUCATION _____ EXPERIENCE _____ MONTHS

ADDRESS
RESIDENCE _____

CITY _____ PIN _____

Tel _____ Cell _____

e-mail _____

WORK PLACE (CO. NAME) _____

CITY _____ PIN _____

TEL _____ FAX _____

e-mail _____

I have read and agree to abide by the rules and regulations of NDTs India (P) Limited.

DATE _____

PLACE _____

SIGNATURE OF THE CANDIDATE

..... For Office Use Only

Course(s) Opted for VT PT MPT RTFI ECT UT PAUT TOFD

Course ID(s) _____



ISO 9001:2008 Certified Company

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