## **Application Form for Apprenticeship Training in MeECL**

. Full name (in Capital Le	etters and Please do not use a	ny initials)
. Date of Birth :-	Month	Data
Year	Month	Date
. Place of Birth :-		
Village / Town	Police Station	District State
. Father's / Mother's & (Please do not use any initials)	Husband's name (in case	e of married female) :-
. A. Permanent Address	s in full :	B. Present Address in full:
	no	
Contact Number:		
Apprenticeship applie	d for [Degree / Diploma]	
Branch of Engineerin (Mechanical/Electrical/E		Computer Science/Information Technology)
Educational Qualifica	itions:	
(i) Name of Institu	tion & Address:	
(ii) Date of Passing (Candidates who p		ntions on or before the year2014 are not eligible)
	Iarks obtained (overall):  ny other form are to be conve	erted to percentage, else application will be summarily reject
O Are vou a meml	per of SC / ST? If wes in	ndicate accordingly