

Under the aegis of the Development Commissioner (HC), Ministry of Textiles Govt. of India

Chauri Road, S.R.N. BHADOHI-221401(U.P.) Phone: +91 5414 228409, 225504 Fax: 05414 225509 e-mail: iict@iict.ac.in, Website: http://iict.ac.in

INTERNATIONAL DISTANCE LEARNING PROGRAMME (IDLP)

Approved By UGC-AICTE-DEC Joint Committee, Govt. of India

APPLICATION FORM

1. 1	vame of	r the Applicant :		╬			╬					-	╬	╬		╬				╬		╬	묶	\exists		Aff	iv
2. Name of his Father/Guardian		ian: 🔲																				<u>_</u> [f At	tested	
3. [Date of	Birth :																	1	spo Rec	rt Size ent						
4. (Contact																	Ph	oto	graph							
5. E	E Mail Id	d :																									
6. F	Full Add		P: P											PIN									ase t en	gory : tick ✓			
7. F	ermane]]] P	I									ВС	tificate)	
9. P	hone/ N	1obile:																									
10.	Educatio	onal Qualification:	(attach	qu	ıalif	fyin	g e	xan	1. C	erti	ifica	ate))														
Sl.No. Examination				Board/University										Subjects										% of Marks			
	1.	10th/Equivalant																									
	2.	12th/Equivalant																									
	3.	Any other																									
11.	Applied	For : Certificate			D	iplo	ma																				
12.	Name o	f the course:																									
13. F	ee Det	ails: CASH / Dema	nd Dra	ft																							
14.	DD Deta	ails:		D	D		J (Amou]								B:	ank							
15.	Experie	nce if any:							-																		
13.	Name o	of Organization:																									
General Instructions: 1. Attach Xerox copy of all educational certificates along with two recent couloured photographs. 2. Attach Experience certificate(s) if any.													₹														
Date	e:																										
Place: S										Sig	ign of Candidate																