Institute of Computer Sciences & Management
(Run by Society of Computer Sciences & Management)
Chitaipur,Kandwa,Varanasi
(Registered Under govt. of U.P. & India)
REG. No. : 21,1860

Estd 2004

Training Form

Date : __/__/____

SR No. _____   Enrollment No. : _____

Condidate's Name : _____

Father's Name : _____

Mother's Name _____

Date of Birth : __/__/____ (in word)_____

Contact No. : _____   Email : _____

Course Name : _____

Address : _____

_____

Pin Code : _____   Training Duration To : __/__/____   From : __/__/____

Attested Passport size photo

Declaration

"I, _____, hereby declare that all the information submitted by be the application form is correct, true and valid. I will present the supporting documents as and when required. I agree to attend all training sessions and to participate in all activities as instructed. I also agree to follow all safety procedures and to abide by the rules and regulations of the training facility. I understand that I am responsible for my own learning and that I must put forth my best effort to succeed in the training program. I also understand that I am responsible for my own behavior and that I will be held accountable for any violations of the training facility's rules and regulations.

Signature of Candidate   Signature of Director with seal