

# SRI DRIVING TRAINING INSTITUTION

FORM NO. - A

SL NO. \_\_\_\_\_



## APPLICATION FORM FOR DRIVING TRAINING ADMISSION

AT/PO - KOMAND, DIST - NAYAGARH, PIN - 752090 (ODISHA)

MOB - 7682815599, E-mail ID - sridrivingtik@gmail.com

### FOR OFFICE USE ONLY

Session \_\_\_\_\_

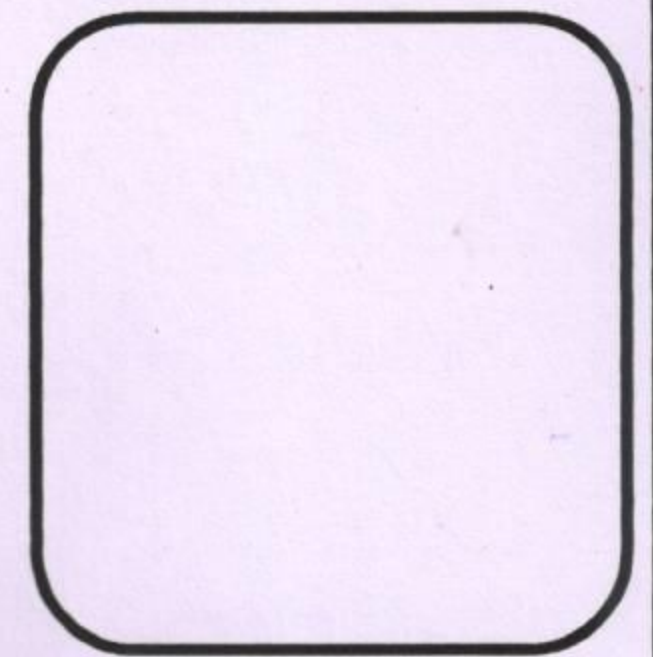
Verified by \_\_\_\_\_ Index No. \_\_\_\_\_

(To be filled by the candidate in their own handwriting only)

Trade in which Admission is desired in order of preference :-

a) \_\_\_\_\_ b) \_\_\_\_\_

1. Name of the Applicant : \_\_\_\_\_  
(In Block Letter)
2. Father's Name : \_\_\_\_\_
3. Guardian's Name : \_\_\_\_\_  
(If other than Father)
4. Address details : -



#### Present Address

AT \_\_\_\_\_  
PO \_\_\_\_\_  
PS \_\_\_\_\_ Dist \_\_\_\_\_  
State \_\_\_\_\_ Pin \_\_\_\_\_  
Mob \_\_\_\_\_

#### Permanent Address

AT \_\_\_\_\_  
PO \_\_\_\_\_  
PS \_\_\_\_\_ Dist \_\_\_\_\_  
State \_\_\_\_\_ Pin \_\_\_\_\_  
Mob \_\_\_\_\_

5. Date of Birth : Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_
6. Age : \_\_\_\_\_
7. Sex : \_\_\_\_\_
8. Nationality : \_\_\_\_\_
9. Religion : \_\_\_\_\_
10. Blood Group : \_\_\_\_\_
11. Height (Minimum 5') : \_\_\_\_\_
12. Documents/ Photo Copies of Certificate etc. attached (As per the instruction of the prospectus)

#### For HMV

1. LMV Copy
2. Pass Photo 02nos.
3. Aadhar Xerox
4. Residence Proof
5. Qualification Certificate
6. Cast Certificate

#### For LMV

1. Pass Photo 02nos.
2. Blood Group
3. Voter I-Card Xerox
4. Aadhar Xerox
5. Qualification Certificate

Date -

Place -

Signature of the applicant