## APPLICATION FORM FOR APPRENTICESHIP at INMAS Delhi

Advt. No. INMAS/RAC/APPR-02/2024-25

**SUBJECT** (in specialisation) (Tick any one): B.Sc./B.Pharma/B.L.I.Sc./Diploma L.I.Sc.

1.	Name (in BLOCk	( LETTERS)					
2.	Apprentice Cates	gory	(Graduate/ Technician Apprentice)				
3.	NATS Registration Enrolment No.	on/				]	
4.	Father's Name				Photo (Self-Attested)		
5.	Gender (M/F/Ot	thers)					
6.	Category : SC/ST	Γ/OBC/Gen					
7.	Aadhar Card No	•					
8.	Date of Birth/Age		Years:		Months:	Days:	
9.	Correspondence Address						
10.	Permanent address						
11.	Phone/Mobile No.						
12.	Email ID						
13.	Education qualification (in chronological order). Self-attested copies to be enclosed						
Sl. No	Examination/ Degree	Board/ University		Subject	Year of Passing	% Marks	Division/ Class
Declaration	I 1: proby declars that the in	oformation furnishe	d above is true	oomplete and or	errect to the bes	t of my Isnovyles	lge and belief I

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage, my candidature / appointment shall be liable to cancellation / termination without notice or any compensation in lieu thereof.

Place: Date:	(Signature of the applicant)
List of enclosures: 1.	

3.
4.

(Note: - Application should be submitted in typed format and hand write to the state of the stat	ten application will be summarily
rejected)	