# Sarva Computer Shiksha Abhiyan

Reg. Govt. of India New Delhi S-31/2013 An ISO 9001-2008 Certified Institution

### REGISTRATION FORM

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#### **DECLARATION BY THE APPLICANT**

13. Batch Time

I have read and understood, the rules and regulations of the Institute and satisfied myself that I fulfill the eligibility conditions as laid down in the prospectus. I have furnished necessary information / document (s) correctly I shall submit any other document (s) that may be required in the future. I understand that my candidature is liable to be cancelled by the SCSA if the information / document (s) submitted herewith is found incorrect or misleading. Further, the SCSA has full authority to take appropriate action which shall be acceptable to me. In future also, if any information submitted by me is found incorrect, the SCSA institute has the

authority to cancer the course at any time	
Guardiance Signature	Student's Signature
Place	Place
Date	Date

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#### REGISTRATION FORM

STEP FOR SUCCE **For Head Office** Pass Port FOR OFFICE USE ONLY Size Photo Registration No. **Duly Attested** Ву Study Center Name & Code Centre Head ጼ Student Remark **Authorised Signatory** 1. NAME OF STUDENT (FILL IN BLOCK LETTERS IN OWN HAND WRITTEN) NAME OF FATHER/ GUARDIAN/ HUSBAND (FILL IN BLOCK LETTERS) **NATIONALITY** 4. CATEGORIES 5. Gender 6. DATE OF BIRTH (GEN/ SC/ ST/ HANDICAPPED) (MALE/ FEMALE) (DD/ MM/ YY) **PERMANENT ADDRESS** Ph **CORRESPONDENCE ADDRESS** Ph 9. ACADEMIC QUALIFICATION (ENCLOSE ALL SUPPORTING CERTIFICATES IN XEROX) (Please Tick) .10TH PASS L 12 TH PASS L GRADUATE L POSTGRADUATE **BELOW 10TH** OTHERS (IF ANY, PLEASE SPECIFY) **DIPLOMA** 10. Course Name 11. COURSE CODE **PERIOD OF COURSE** 

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