



Sophisticated Test and Instrumentation Centre

CUSAT Campus , Kochi 682022

**Application Form : Skill Based Training on Water Testing
(EIACP) Centre Hub, KSCSTE, Kerala-Capacity Building Programme
Sponsored and MoEF&CC, Government of India**

(For Candidates from SC/ST communities and other backward class from rural village)

Full Name: _____

Gender: _____ Date of Birth: _____

Caste & Community: _____

Address: _____

Village: _____

Ward name & no: _____

Panchayath/Municipality/Corporation/ _____

District: _____ State: _____ Pin Code: _____

Mobile Number: _____ Email: _____

Job: (if yes, the name of the post and company) _____

Academic Qualifications:

Name of Institution: _____

Degree: _____ Subject: _____

Year of Passing: _____ CGPA/Marks : _____ Percentage of Marks: _____

Additional Qualifications (if any): _____

(Submit - Caste/Community certificate, Mark list of the qualifying examination and address proof along with application)

Course Information: Have you previously studied any training courses related to the subject? (Yes/No) _____, If yes, please provide details:

Course Name: _____ Duration: _____

Institution/University: _____

Declaration

I hereby declare that the above information is true and correct to the best of my knowledge. I understand that any false information provided may lead to the cancellation of my application.

Date: _____ Signature: _____

For office use only

Date of joining:

Approved by: