



GOVERNMENT OF GOA

DIRECTORATE OF SKILL DEVELOPMENT & ENTREPRENEURSHIP

3rd FLOOR, SHRAM SHAKTI BHAVAN, PATTO PLAZA, PANAJI GOA -403001.

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**ENROLLMENT FORM FOR COURSES UNDER CHIEF MINISTER'S KAUSHALYA PATH
SCHEME (CMKPS)**

ENROLLMENT No: -

Date:

Name of Course/Trade: _____

(1) Name of the Candidate (As per Birth Certificate)

Shri./Kum./Smt. _____

(2) Name of Parent/ Guardian/Spouse: _____

(3) Date of Birth: _____ Gender: _____

(4) *Mobile/Tel. No.: _____

(5) *E-mail Address: _____

(6) *Aadhaar Card No: _____

(7) Permanent Address:

H. No.: _____ Village/Town: _____ Taluka: _____

District: _____ State: _____ Pin code: _____

(8) Tick in the appropriate category in the corresponding boxes:

I belong to General Scheduled Caste Scheduled Tribe Person with Disability Other Backward Classes Women and Girls Children of Ex-Servicemen Defense Personnel Children of Freedom Fighters EWS

(9) Educational Qualification

Qualification	Name of School/College	Total Marks Obtained	Maximum Marks	% of Marks Obtained
STD. VIII th				
S.S.C				
Diploma/ Graduate				
Degree/Post Graduate				

Signature (Candidate)

Signature (Parent/Guardian/Spouse)

List of SELF ATTESTED COPIES OF DOCUMENTS to be attached to this Application.

- a. Statement of Marks Obtained in VIII Std./SSC/Diploma/Degree as applicable.
- b. Certificate of Passing VIII Std./SSC/Diploma/Degree as applicable.
- c. Valid Certificate regarding Residence of 10 years in Goa preceding the date of this application.
- d. Birth Certificate.
- e. Certificate that the candidate belongs to category as mentioned in point 8 on pg 1
- f. Aadhaar Card.
- g. Latest Passport size photographs (2) Nos.

GOVERNMENT OF GOA

1ST FLOOR, SHRAM SHAKTI BHAVAN, PATTO PLAZA, MARAJI GOA-403001

EXAMINATION BOARD FOR COURSES UNDER TECHNICAL EDUCATION SCHEME (TECHS)

ENROLLMENT NO. _____

Name of Course/Under _____

(1) Name of the Candidate (As per Birth Certificate) _____
 Mr./Mrs./Ms. _____

(2) Name of Parent/ Guardian/Spouse _____

(3) Date of Birth: _____

(4) Mobile No. _____

(5) E-mail Address _____

(6) Aadhaar Card No. _____

(7) Permanent Address _____

 Village/Town: _____
 District: _____
 State: _____

(8) I belong to the appropriate category in the corresponding box:
 Belong to General or Scheduled Caste or Scheduled Tribe or Other Backward Classes or Women and Girls or Children of Servicemen or Defense Personnel or Children of Freedom Fighters or EW
 Other Educational Qualification

Qualification	Name of School/College	Total Marks Obtained	Maximum Marks	Year
8 th Std				
SSC				
Diploma				
Degree/Post				
Others				

Signature (Parent/Guardian/Spouse) _____

Signature (Candidate) _____