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**ENROLLMENT FORM**

**CHIEF MINISTER'S KAUSHALYA PATH SCHEME (CMKPS)**

**O/o Directorate of Skill Development & Entrepreneurship**

**Panaji Goa**

**(No Original Documents to be submitted with the Application)**

Enrollment for the Skill Based Short Term Course of \_\_\_\_\_

(1) Name (As per Aadhaar Card in Block Letters): \_\_\_\_\_

(2) Date of Birth: \_\_\_\_\_ Age as on date (YY/MM): \_\_\_\_\_

(3) Gender: \_\_\_\_\_ Marital Status: \_\_\_\_\_

(4) Address of correspondence (in Block Letters):  
\_\_\_\_\_  
\_\_\_\_\_

(5) Nationality: \_\_\_\_\_

(6) Contact No. \_\_\_\_\_ Email Id: \_\_\_\_\_

(7) Employment Exchange Reg. No.: \_\_\_\_\_

(8) Residence Certificate No.: \_\_\_\_\_ valid up to \_\_\_\_\_

(9) Aadhaar Card No: \_\_\_\_\_

**(10) Education Qualifications:**

Qualification	Month & Year Passing	Name of Board/University	Overall % OR Grade Achieved
Std. 8 <sup>th</sup>			
S. S. C. / H. S. S. C. / I.T.I.			
Diploma/ Graduate			
Degree/ Post Graduate			
Any Other			

(11) 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.

List of SELF ATTESTED COPIES OF DOCUMENTS to be enclosed to this Enrollment Form.

- Certificate of Passing Std.8<sup>th</sup>/S.S.C./H.S.S.C./ITI/Diploma/Graduate/Post Graduate/Any Other as applicable.
- Valid certificate regarding Residence of 10 years in Goa state preceding the date of enrollment.
- Birth Certificate.
- Aadhaar Card
- Category verification document (Pl. refer to Page 2, Point 11)
- Latest Passport Size Photographs – 2 Nos.

### DECLARATION

I, \_\_\_\_\_ son/daughter/spouse of \_\_\_\_\_ hereby state that the contents of the enrollment form are true to my best knowledge and I possess the requisite qualification and other mandatory documents for the course. I understand that in the event of particulars or information given herein being found false or incorrect, my enrollment for the course is liable to be **REJECTED OR CANCELLED EVEN AFTER SELECTION.**

Place:

Date:

(Signature of the Candidate)

Name: