APPLICATION FORM FOR DOEACC "O" LEVEL COURSE

Free Training for SC/ST Candidates

by

Backward Classes Welfare Department, Govt. of West Bengal

in Association with

The Institute of Computer Engineers (India)

Chatterjee International Centre, 12th floor, Kolkata – 71

One copy photo is to be affixed

FILL THE FORM IN BLOCK LETTERS

Name of the Centre ....

Name of the Applicant ....

Father's /Guardian's Name ....

Father's /Guardian's Profession ....

Permanent address with PIN & contact no...

....

Correspondenceaddress with PIN& contact no...

....

Nationality ……………………………………… ………………If SC/ST ………………………………………………

Annual Family Income(Rs.): …………………………………Sex (male/ Female)…………………………………………….

Date of Birth ………………………………………………Age ……………………………….. ……………………………………..

Examinations passed	Board/Council/ University	Year of passing	Subjects	% of marks obtained	Present Institution

I do solemnly declare that all the particulars given above are true. I shall abide by the guidelines of the Backward Classes Welfare Department, Government of West Bengal. Further declare that I shall attend at least 75% of the training classes conducted by The Institute of Computer Engineers (India), Kolkata.

I agree   **Confirmed by**

Date:……………….   …………………………   …………………………………………………
(dd/ mm/ yyyy)   *(Student's Signature)*   *(Parent's / Guardian's Signature)*

Please enclose thexeroxed&attested copies of the following documents along with the filled in application form and tick against each:I) Copy of Mark Sheet(s) ii) Two passport sized photographs iii) Copy of SC/ST Certificate iv) Copy of age proof document(birth certificate/ admit card) v) Family Income declaration vi) Residential Certificate.
Note: Originals of all the above stated documents have to be shown during the interview.

Declarationon Family Income by Parent /Guardian of the applicant

I……………………………………………………....the parent/guardian of

……………………………………… ………………residing at …...…..

…..hereby declare that I belong to SC/ST Community and my annual family income from all sources is Rs. ....(infigures) Rupees …...… only (in words).

I also declare that, at any stage, the information given by me if proved to be false / not true, benefit of the scheme may be withdrawn and legal action as deemed fit by the authority may be taken against me or my ward.

Date:……………………   ………………………………………………………………………….
                                                                        Full Signature of Parent / Guardian