## APPLICATION FORM FOR APPRENTICESHIP at INMAS Delhi

Advt. No. INMAS/RAC/APPR-02/2024-25

**SUBJECT** (in specialisation) (Tick any one): B.Sc./B.Pharma/B.L.I.Sc./Diploma L.I.Sc.

1.	Name (in BLOCk	K LETTERS)							
2.	Apprentice Cates	gory	(Graduate/ Technician Apprentice)						
3.	NATS Registration Enrolment No.	on/							
4.	Father's Name						noto Attested)		
5.	Gender (M/F/Ot								
6.	Category : SC/S7	: SC/ST/OBC/Gen							
7.	Aadhar Card No					1			
8.	Date of Birth/Age		Years:		Months:	Days:			
9.	Correspondence Address								
10.	Permanent address								
11.	Phone/Mobile No.								
12.	Email ID								
13.	Education qualification (in chronological order). Self-attested copies to be enclosed								
Sl. No	Examination/ Degree	Board/ University		Subject	Year of Passing	% Marks	Division/ Class		
Declaration I he	I 1: ereby declare that the in	oformation furnishe	d above is true	complete and o	orrect to the bes	t of my knowled	lge and helief I		

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage, my candidature / appointment shall be liable to cancellation / termination without notice or any compensation in lieu thereof.

Place: Date:	(Signature of the applicant)
List of enclosures:	

3.
4.

(Note: - Application should be submitted in typed format and hand written application will be summ rejected)	iarily