

A National Literacy Training Programme

ALL INDIA MAHATMA GANDHI COMPUTER SAKSHARTA MISSION

ADMISSION FORM



ALL INDIA MGCSM

Date:- ___/___/___

1] Student's Details: -

A) First Name

B) Middle Name

C) Last Name

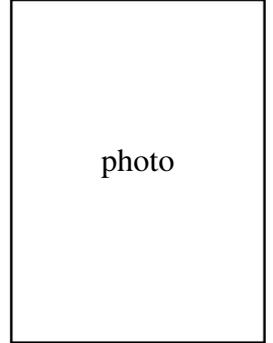
D) Date of Birth

E) Caste SC ST OBC Other F) BPL

G) Aadhaar No

I) Contact No

J) E-mail



2] Guardian's Details :-

A) Father Name

B) Mother Name

C) Contact No

3] Address Details :-

4] Course Details :-

A) Course Name

5] Centre Details :-

A) Centre Name

B) School Name

DECLARATION

I hereby declare that the information given in the application form by me is true. I have filled the application form after reading & understood the rules of examination. I guarantee to certify that the eligibility for examination if the information given in this form is wrong than my application should be treated canceled.

Student Signature