

THE KRISHNA DISTRICT COOPERATIVE CENTRAL BANK LTD., MACHILIPATNAM
APPLICATION FORM FOR APPRENTICESHIP TRAINING

To

The Chief Executive Officer,
Krishna DCC Bank Ltd.,
Machilipatnam.

Photo

Sir,

Sub: Application for Apprentice Training in "The Krishna District Cooperative Central Bank Ltd., Machilipatnam".

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NAME OF THE APPLICANT	
FATHER'S NAME	
DATE OF BIRTH(Proof to be attached)	
AGE AS ON 01.11.2020	
GENDER	
MARITAL STATUS	
NATIONALITY & RELIGION	

CATEGORY SC ST BC OC PC Ex-Servicemen

ADDRESS FOR CORRESPONDENCE (Aadhar should be attached)	
MOBILE NO	
EMAIL - ID	

EDUCATIONAL QUALIFICATION :

Qualification	University / Institute / Board	Year of Passing	Division / Class	Marks in* Percentage	Subjects Studied

QUALIFICATIONS IN COMPUTERS:

Nature of Qualification	Institute	Duration of Study	Division / Class / Grade	Marks %	Subjects Studied

ANY OTHER RELEVANT INFORMATION:

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DECLARATION:

I hereby declare that all the statements made in this application are True, complete and correct as per my knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage or I am not satisfying any of the eligible criteria stipulated, and also in case of creating influence / undue pressure regarding my training shall lead to cancellation of my candidature. I hereby agree that I shall work at any Branch / Office of the Krishna DCC Bank as allotted to me.

Place:

Yours Sincerely,

Date:

Enclosures:

(Signature of the Candidate)