



**THDC INDIA LIMITED**

(A Joint Venture of Govt. of India & Govt. of U.P.)

(A MINI RATNA COMPANY)

Administrative Building, Bhagirathipuram, Tehri, Tehri Garhwal, Uttarakhand- 249124

Advt. No.: 01/2020

Apprentice Trade Applied For:

Please affix self  
attested passport size  
photo

**A Personal Details:**

1 Name (as appears in SSC certificate)

Please put a space between your first name, middle name (if any) last name

2 Enrolment/ registration no. as indicated in web portal  
www.apprenticeshipindia.org

3 Father's Name

4 Date of Birth

 DD   MM   YYYY 

5 Age as on closing date

 DD   MM   YYYY 

6 Sex (write M or F)

7 State of Domicile

8 Name of Tehsil

**B Correspondence Address**

City/ Town

State

Pin Code

District

Tehsil

Contact No. 1

Contact No. 2

**C Permanent Address**

City/ Town

State

Pin Code

District

Tehsil

*Shankar*

**Basic Qualification- Matriculation onwards**

Exam Passed	Institution/ University/ Board	Subjects studied/ Branch of Specialization	Duration of Study	Month & Year of Passing (MM/YYYY)	Aggregate % of Marks	Full Time/ Part Time/ Correspondence

**Professional Qualification (ITI Qualification) (Please mention qualification which makes you eligible)**

Exam Passed	Institution/ University/ Board	Subjects studied/ Branch of Specialization	Duration of Study	Month & Year of Passing (MM/YYYY)	Aggregate % of Marks	Full Time/ Part Time/ Correspondence

\*If there is any Cumulative Grade Average (CGPA)/ please convert it to % of marks and enclose conversion certificate.

E Category (GEN/SC/ST/OBC/Ex-Service)

F Are you Physically Handicapped ? (Yes/No)

If yes. Please mention the details as follows : Type of Handicap: 

VH	HH	OH

 Please

Extent of disability as specified in the disability certificate :

G Have you ever been convicted by any court of law or any disciplinary proceedings/ enquiry is pending against you or any penalty has been imposed upon you? (Yes/No)

H Have you undergone apprenticeship training earlier? (Yes/ No)

I Do you belong to Doob Kshetra/ Partial Doob Kshetra/ Project Affected Family ? (Yes/ No)   
(if yes, please enclose certificate as proof)

**Declaration:**

I affirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me willfully to conceal or misrepresent the facts, my candidature/ appointment shall be summarily rejected or terminated without any notice.

Date: .....

Signature: .....

Place: .....

Name: .....

**Enclosure:**

1. Proof of SC/ST/OBC/PWD/Ex-Servicemen/ State Domicile Certificate. In case of OBC, Non-Creamy Layer Certificate (if applicable).
2. The candidate should also enclose attested/ self-attested certificates in support of age, educational qualifications, marksheets, experience certificate etc. along with their application.
3. Certificate of Domicile issued by Competent Authority.

*Shashank*