APPRENTICESHIPTRAINING

CONFIDENTIAL

P & A Ref. No:



FLUID CONTROL RESEARCH INSTITUTE

(An Autonomous R & D Institute under Ministry of Industry)
Dept. of Heavy Industry, Government of India
Kanjikode West, Palakkad 678 623, Kerala, India
Phone: 0491-2566206, 2566120, 2566119 Fax: 0491-2566326,

Photo

Email:cu	ıstomerca	care@fcriindia.com	
Apprenticeship Train	ing :	Graduate Engg Diploma Engg	
Branch of Study	:		
Name in Full (BLOCK CAPITAL)	:		
Father's Name & Occupation	:		
Present Address	:		
Permanent Address	:		
Email	:		
Mobile No	:		
Passport Number	:	Date till valid:	
Age* & Date of Birth:	:		
Marital Status	:		
Nationality	:		
State of Domicile &Mother Tongue	:		
Religion / Caste	:		
Scheduled Caste / Scheduled Tribe	:		

Langu	ages k	nown W	rite :		
Have yo	u ever b	een Interviewed 6	earlier in FCRI :		
			ACADEMIC	C RECORDS*	
Year Course & S		ecialization	School/College / University & Institute	Class & Percentage of Marks	
From	To	_			
		ourses / Profe grammes*	ssional :		
Give (' backgi	Two re round,	ferences (not service caree	related to you r and characte) who are well acquainte	d with your
1.	Name	• [
	Occupa Address	L			
1	Address	s :			

2. Name : Occupation : Address :			
R FAMILY ME	MBERS		
Name	Occupation (if employed give official address)	Present postal address	Permanent Home address
mation that y	ou may wish to fur	rnish	
	R FAMILY ME	R FAMILY MEMBERS Name Occupation (if employed give official address)	R FAMILY MEMBERS Name Occupation (if employed give address

DECLARATION

I hereby certify that the particulars furnished as above are true, correct and complete in all respects. I agree and accept reservation that at any time, if any of the particulars is found to be untrue, incorrect and /or incomplete, my appointment in the Institute, may be terminated without notice.

Place	:	Signature
Date	:	

^{*}Please attach Copy of supporting documents.