



RAJIV GANDHI MEMORIAL TELECOM TRAINING CENTER

GST ROAD, MEENAMBAKKAM, CHENNAI-600016

JOINING REPORT: CCNA 2017 COACHING

APPLICATION ID: BATCH: DATE:

(TO BE FILLED IN CAPITAL LETTERS ONLY)

1. NAME OF CANDIDATE: _____

(ID PROOF MAY BE ENCLOSED)

2. MOBILE NUMBER : _____

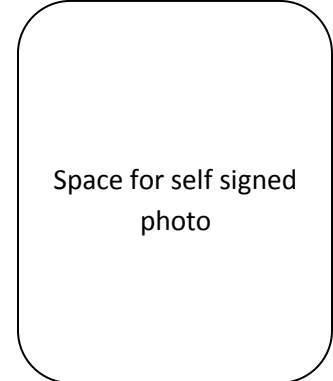
3. EMAIL ID: _____

4. FATHER'S NAME/MOB NO : _____

5. DATE OF BIRTH (DD/MM/YYYY) : _____

6. EDUCATIONAL QUALIFICATION/DISCIPLINE: _____

7. ADDRESS FOR CORRESPONDENCE: _____



8. HOSTEL FACILITY REQUIRED :

YES	NO
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9. CCNA PAYMENT DETAILS

DD	POS
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10. IF DD TAKEN : DD NUMBER: _____ DRAWN ON DATE: _____

DRAWN AT BANK: _____ BRANCH: _____ AMOUNT: _____

11. IF POS: TRANSACTION NUMBER: _____ DATE: _____ AMOUNT: _____

DECLARATION:

I, _____ declare that I will abide by the rules of the institution inside the campus and hereby declare that I will not claim any job in BSNL / any other PSU's by attending this coaching.

PLACE:

DATE:

(SIGNATURE)

DOCUMENTS SUBMITTED (IN PHOTO COPY):

- Valid Photo ID proof
- Valid Address proof
- Degree Certificate (or its equivalent)