

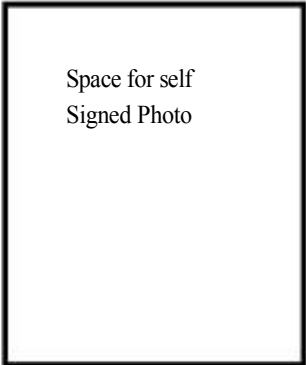


**Rajiv Gandhi Memorial Telecom Training Centre - RGMTTC**  
**Meenambakkam, Chennai – 600016**

**Course Name: BSNL Certified Fibre Optics Engineer**

Enrollment No... OPENG..... (FOR OFFICE USE ONLY)

(To be filled in CAPITAL LETTERS ONLY)



1. NAME OF CANDIDATE: \_\_\_\_\_

2. FATHER'S NAME: \_\_\_\_\_

3. DATE OF BIRTH \_\_\_\_\_ (DD\MM\YYYY)

4. QUALIFICATION

Degree	University / college	% of marks

5. ADDRESS FOR CORRESPONDENCE \_\_\_\_\_

6. CONTACT INFORMATION

Landline no. \_\_\_\_\_ Mobile no. \_\_\_\_\_

Email \_\_\_\_\_

7. HOW DID YOU COME TO KNOW ABOUT THE COURSE (Please tick)

a. NEWSPAPER  b. WEBSITE  c. FRIENDS

OTHERS (Please SPECIFY) \_\_\_\_\_

8. Course fee (in favour of "Sr A.O ( Cash), O/O CGM, BSNL, TN Circle, Chennai-2" , payable at Chennai.)

Vide receipt no. / DD NO. \_\_\_\_\_ Dated \_\_\_\_\_ for Rs. \_\_\_\_\_

DATED \_\_\_\_\_

Signature of Candidate

**Rajiv Gandhi Memorial Telecom Training Centre - RGMTTC**  
**Meenambakkam, Chennai – 600016**

**ACKNOWLEDGEMENT**

Received Rs. \_\_\_\_\_ vides cash /DD no. \_\_\_\_\_ dated \_\_\_\_\_

for the course \_\_\_\_\_

from Mr./ Ms. \_\_\_\_\_

Address for Correspondence \_\_\_\_\_

---