



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

**Course Name: BSNL Certified Network Engineer**

Enrollment No..NWENG-.....(FOR OFFICE USE ONLY)

(To be filled in CAPITAL LETTERS ONLY)

Space for self  
Signed Photo

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 \_\_\_\_\_

\_\_\_\_\_