

DR. R. SATHEESH CENTRE FOR REMOTE SENSING AND GIS SCHOOL OF ENVIRONMENTAL SCIENCES MAHATMA GANDHI UNIVERSITY P.D Hills P. O., KOTTAYAM – 686 560, KERALA, INDIA

Photograph

Training Partner

APPLICATION FOR ADMISSION TO DRONE REPAIR AND MAINTENANCE COURSE

	SOFILAB						
1.	Name of the Course						
2.	Name of the candidate (in block letters)						
3.	Expansion of initials						
4.	Age and Date of birth		Nationality:				
5.	Place of birth	Taluk	District	State			
6.	Permanent Home Address with Telephone No.						
7.	Address to which communication should be sent						
	Telephone No.						
8.	E-mail. Name and Address of parent or guardian (State relationship)						
9.	Name and Address of the local guardian, if any						
10.	Academic Qualification:						

Statement of Mark (Attach copies of	s Secure the Mar	d in the Qualifyin k lists/Certificates	ig S)]	Examination				
Name of Examinat Passed and Name of University		Subject	Marks Secured	Maximum Marks	Percentage of marks secured	Year of passing and Reg. No.			
11. Additional Qu (Attach neces			:						
12. Whether spon	sored? (Yes/No)							
13. If Yes, Occup	ation / I	Designation							
Name and Ad Employer with		_							
14. Passport Num	ber (if y	ou have)							
15. Aadhaar Numb	er								
16. Details of Transaction			Transaction ID	Date	Amount	Mode of Paymer			
		D	ECLARATION						
I the application are tru will be produced for v and conditions mentio	e and the erification	documents attachen when required. I		pies of the origin	nal in my posse	ession, which			
Place: Date: Countersigne			ned by Parent / Gua	S d by Parent / Guardian		ignature of the applicant			
		For	Office Use Only						
Remarks	:		Detai	Details of DD for prior registration					
Date of Admission	:		Amo	unt:	No. & Date:				

Admission Number :