



ENTREPRENEURSHIP DEVELOPMENT PROGRAMME (EDP) ON FOOD PROCESSING INDUSTRIES

APPLICATION FORM

Attach
Passport
Size
Photograph

1. NAME OF THE CANDIDATE (Capital Letter)	:	<input type="text"/>				
2. FATHER'S NAME/HUSBAND'S NAME	:	<input type="text"/>				
3. PRESENT ADDRESS	Vill :	<input type="text"/>	P.O.	<input type="text"/>		
	Block :	<input type="text"/>	P.S.	<input type="text"/>		
	Dist :	<input type="text"/>	PIN.	<input type="text"/>		
4. PHONE /MOBILE NO.	:	<input type="text"/>				
5. E-MAIL	:	<input type="text"/>				
6. PERMANENT ADDRESS	Vill:	<input type="text"/>	P.O.	<input type="text"/>		
	Block :	<input type="text"/>	P.S.	<input type="text"/>		
	Dist :	<input type="text"/>	PIN.	<input type="text"/>		
7. ADDHAR CARD No.	:	<input type="text"/>	<input type="text"/>	<input type="text"/>		
8. EDUCATIONAL QUALIFICATION	:	<input type="text"/>	YEAR	<input type="text"/>		
9. DATE OF BIRTH/AGE	:	<input type="text"/>	AGE	<input type="text"/>		
10. GENDER (Tick Mark Only)	:	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	<input type="checkbox"/> OTHER		
11. CATEGORY (Tick Mark Only)	:	<input type="checkbox"/> GEN	<input type="checkbox"/> ST	<input type="checkbox"/> SC	<input type="checkbox"/> OBC	<input type="checkbox"/> PH/MINORITY
12. EXPERIENCE IF ANY	:	<input type="text"/>				
13. INDICATE YOUR INTEREST FOR ATTENDING THE PROGRAMME	:	<input type="text"/>				
14. PROJECT IDENTIFIED (IF ANY)	:	<input type="text"/>				
15. INVESTMENT CAPACITY	:	<input type="text"/>				

PLACE :-
DATE :-

SIGNATURE OF THE CANDIDATE