APPLICATION FOR SKILL DEVELOPMENT ASSISTANCE

То

The Secretary A & N Building and Other Construction Workers Welfare Board Port Blair

1.	Name and address of applicant	
2.	Registration No.	
3.	Age and date of birth	
4.	Details of skill Training (a) Name of ITI or VTC (b) Year of passout (c) Trade	
5.	Date of Registration	
6	Details of nominee as recorded	
7.	Date of payment of 1 st subscription and amount	
8.	Date of payment of last subscription	
9.	Bank Account details	
10.	List of Documents submitted (a) Course completion/passout certificate from ITI/VTC.	

The facts furnished above are true to my knowledge and information

Place: Date:

Name and signature of applicant Mobile