

CENTRE FOR MATERIALS FOR ELECTRONICS TECHNOLOGY

ATHANI, M.G. KAVU P.O., THRISSUR - 680581

APPLICATION FOR FECILITATION TRAINEES

Notification No. CMET/TH/ADM/05/2024

CATEGORY LEVEL: (Please tick ✓ the appropriate category)			POST GRADUATE LEVEL GRADUATE LEVEL			
		tegory)				
1.	Name in full	:				
2.	Name of Father/Husband					
3.	Sex		ale/Female		A CC	
		. 1010	ale/Terriale		Affix Passport size	
4.	Nationality	:	/ <i>h</i>		photograph	
5.	Date of Birth (Proof of age shall be enclose	: d):	DD/MM/YYYY		r was in	
6.	Age	:	Y			
	(as on 30.06.2024)					
7.	Marital Status	:				
8.	Whether presently working in Semi-Government/ Public Section 2					
	Autonomous/Corporate Bodie		.c.(11169)			
9.	Permanent Address:					
10.	Address for correspondence:					
11.	Mobile number:					
12.	E-mail address :					
	(All communications will be given through e-mail only)					
13.	Academic & Professional Qualifications:					
	Name of the	Year of	Exam/Degree	Marks/perce	_	
	Inst./Board/University	passing		aggregate &	Division	

14. Previous Training, if any (please give f	ull details) :				
15. Any other information:					
<u>D</u>	<u>ECLARATION</u>				
I hereby solemnly declare that all the statements made in the above proforma are true and correct to the best of my knowledge and belief.					
Place:	Signature				
Date:	Name of the applicant				
[Note: Self attested photocopies of proof of items 5, 13, and 14 should be enclosed]					