

## **BHARAT SEVAK SAMAJ**

TAMILNADU PRADESH

NATIONAL DEVELOPMENT AGENCY, PROMOTED BY GOVT OF INDIA

## NATIONAL VOCATIONAL EDUCATION MISSION REGISTRATION CUM EXAMINATION APPLICATION

(FILL UP IN CAPITAL LETTERS)

DATE	<u>i.</u>			
1	Institution Approval Number			
2	Institution Name & Full address with Pin Code		Passport size photograph of the candidate to be affixed and attested	
3	Student name in English		here	
4	Date of birth			
5	Sex	○ Male ○ Female		
6	Name of the Father / Husband (or) Guardian			
7	Permanent address			
8	Address for communication			
9	Name of the course			
10	Course Duration	Month One Year Two Year Tyear Two Year II Year Direct II Year		
11	Examination for which year	/20 To/20		
BHARAT SEVAK SAMAJ  TAMILNADU PRADESH  NATIONAL DEVELOPMENT AGENCY, PROMOTED BY GOVT OF INDIA  HALL TICKET  Reg. No:				
1	Name of the Candidate			
2	Institution Address		Passport size photograph of the candidate to be	
3	Course Name		affixed and attested here	
4	Duration			
5	Date and Time of Examination			

5	Address of School/College in which the candidate last studied			
6	Name of qualifying examination passed with the Reg. Number of Govt. Mark Sheet and year of passing			
7	The Board/University from which the candidate passed the qualifying examination			
8	Details of documents enclosed (Only Xerox Copies)			
(This examination application should be submitted along with the exam fees)				
DECLARATION BY THE CANDIDATE				
I hereby declare that the entries made above are correct and that they have been made in my own handwriting.				
Place :  Date : Signature of the Candidate				
Note: University affiliated College Principal (or) BSS Institute Director (or) Institute Head are authorized to attest on the both student Photographs.				
His/Her application for examination has been accepted and granted as a candidate for examination to the aforesaid course for / 20				
Place	<b>9</b> :	For Controller of Examinations		
Date :		BHARAT SEVAK SAMAJ TAMILNADU PRADESH		