



(A Govt. of India Enterprise under the Ministry of Defence)  
I.E.NACHARAM, HYDERABAD – 500 076.

**APPLICATION FOR GRADUATE / DIPLOMA APPRENTICESHIP TRAINING  
(TO BE FILLED IN CAPITAL LETTERS)**

|                                                           |   |                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|
| 01. NAME                                                  | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 02. FATHER'S NAME                                         | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 03. MOTHER'S NAME                                         | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 04. AGE & DATE OF BIRTH                                   | : | Y'r _____ & Mo's _____ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |  |  |  |  |  |  |  |  |  |
|                                                           |   |                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| 05. GENDER                                                | : | MALE <input type="radio"/> FEMALE <input type="radio"/>                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
| 06. QUALIFICATION                                         | : | B.E / B.TECH <input type="radio"/> DIPLOMA <input type="radio"/>                                                                                                                                  |  |  |  |  |  |  |  |  |  |  |
| 07. BRANCH & COLLEGE                                      | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 08. PERCENTAGE / MARKS SECURED IN B.E. / B.TECH / DIPLOMA | : | _____ %                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
| 09. MONTH & YEAR OF PASSING                               | : | _____ & _____                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |
| 10. RESIDENTIAL ADDRESS                                   | : | _____<br>_____<br>_____                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |  |
|                                                           |   | PIN CODE: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>              |  |  |  |  |  |  |  |  |  |  |
|                                                           |   |                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| 11. MOBILE NUMBER                                         | : | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>    |  |  |  |  |  |  |  |  |  |  |
|                                                           |   |                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |  |
| 12. E-MAIL ID                                             | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 13. NATS REGISTRATION NUMBER                              | : | _____                                                                                                                                                                                             |  |  |  |  |  |  |  |  |  |  |
| 14. PERSON WITH DISABILITY                                | : | YES <input type="radio"/> NO <input type="radio"/>                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |
| 15. CATEGORY                                              | : | GENERAL <input type="radio"/> SC <input type="radio"/> ST <input type="radio"/> OBC <input type="radio"/> EWS <input type="radio"/>                                                               |  |  |  |  |  |  |  |  |  |  |

DATE: 09.12.2025  
PLACE: BEL-HYDERABAD

ENCLOSURES(PHOTOCOPY):

1. SSC/SSLC/CBSE
2. BE/BTCH/DIPLOMA CMM
3. BE/BTECH/DIPLOMA OD
4. CASTE CERTIFICATE IF ANY
5. NATS REG COPY.