

**SUPERVISORY DEVELOPMENT CENTRE, KALAMASSERY**  
**DEPARTMENT OF TECHNICAL EDUCATION, GOVT. OF KERALA**  
**APPLICATION FOR REGISTRATION UNDER THE APPRENTICES (AMENDMENT) ACT**

1. Name (in block letters) :
2. Address for communication (in block letters) :

PIN						
DIST.						

3. Phone No. :
4. E-mail ID :
5. Male/Female :
6. Age and Date of Birth :
7. Physically Handicapped : Yes/No (if yes, enclose certificate)
8. Please specify Degree/Diploma with branch :
9. Details of the qualification (Those who send by post, please attach attested copies of consolidated mark list and Provisional/Original Certificate)

Duration of Course	Institution & Place	University / Board	Month & Year of Passing	Division with % of Marks

10. Have you undergone training under Apprentice Act elsewhere : Yes/No
11. Experience if any :
12. Caste and Religion :
13. Whether belongs to SC/ST/OBC :
14. Whether willing to work anywhere in Kerala :
15. \*Details of fee paid (Chalan Number, date and Treasury. Please attach the Chalan) :

Station:

Date:

Signature of the Applicant

\*Fee: Rs. 75/- for Degree holders and Rs. 60/- for Diploma holders (For SC/ST Rs. 40/- and Rs. 30/- respectively on production of Community Certificate). Please remit the amount at any Treasury in Kerala in the Head of Account 0202-02-800-94-OR

NB: Application may be sent to: Assistant Director, Supervisory Development Centre, N.A.D. Road, Kalamassery, Ernakulam - 683 104, Ph: 0484-2556530 with a self addressed envelop affixing stamp of Rs. 5/-.