



PRADHAN MANTHRI KOUSHAL VIKAS YOJANA



CANDIDATES REGISTRATION FORM

Name of TSP		REGISTRATION NO	
PROWINS AGRI SYSTEM		DATE	

Name	Mr/Mrs/Kum		
	First Name		
	Middle Name		
	Last Name		
Gender			
Date of Birth			
Aadhar Enrollment Number			
Aadhar Number			
Alternate ID			
Alternate ID No			
Contact no of Trainee			
Email			
Caste		Religion	
Address	Line 1		
	Line 2		
	Line 3		
PIN		District	
State			
Guardian type			
First Name of Guardian			
Last Name of Guardian			
Pre Training Status			
Previous experience (in Yrs)			



EducationLevel	
TechnicalEducation	
BankName	
BankA/c No	
Branch Address	
IFSC Code	
Where Did You Hear About Scheme	
Name of Govt Institution	
Address	
CourseFee	
FeePaidByTrainee	

Registration No.	
Name of Trainee	
Date of Birth	
Gender	
Contact no of Trainee	
Email	
Case	
Line 1	Address
Line 2	
Line 3	
PIN	
District	
State	
Guardian Name	
Guardian Phone No.	
Guardian Email	
The Training Status	
Professional Experience (in Yrs)	