

INDIA SPONSORSHIP COMMITTEE

ITI - LONAVALA ALUMNI FORM

Photo:

NAME OF CHILD:

REF. NO.:

DATE OF BIRTH:

DATE OF REGISTRATION WITH ISC:

DATE OF PASSING FROM ISC:

CURRENT ADDRESS: _____

TEL. NO. (IF ANY): _____ MOBILE: _____

ITI DETAILS:

Course:

Year of Joining:

Year of Passing:

EDUCATIONAL DETAILS:

STD X: % Name of School:

STD XII: % Name of Junior College:

Graduation: % Name of College:

Any Other Detail:

REHABILITATION INFO & CURRENT POSITION:

Current Family Status:

SIGNATURE:

DATE: