DIVYA JYOTI Educational Trust

(Registered under Trust Act 1882 with Registration No. 201801019004913) First Floor, Meena Complex, Opp. Sai Baba Mandir, Delhi Road , Kukas, Jaipur(302028)

**Mob. No. :-7793086502 Email ID :-** **divyaedu.trust01@gmail.com**  **Website :-** **www.divyajyotieducation.com**

 **REGISTRATION FORM**

CANDIDATE’S

PHOTOGRAPH

 **PERSONAL DETAILS**(Please fill the form in CAPITAL letters only)

* **Name :-............................................................................**
* **Father’s name :-...............................................................**
* **Father’s occupation :-.......................................................**
* **Mother’s name :-.............................................................................**
* **Mother’s occupation :-.....................................................................**
* **Address :-.........................................................................................**

 **.........................................................................................**

* **Email :-............................................................................................**
* **Date of birth :- ....../....../...........**
* **Mob. No.:-...........................Father’s no. :-.....................................**
* **Recently done :-..............................................................................**
* **School Name :- ................................................................................**
* **Selection type:- ............................. Offer :-.....................................**
* **Enrol me for the course :- ...............................................................**

 **..............................................................**

* **Donation/day:- ...............................................................................**

(I wish to take admission for the above mentioned course. I am aware that my name and photo can be used for promotion purpose by career quest in their advertisement .I do not any objection for the same.. Kindly accept my application and enrol me for the correspondence course.)

Place:-

Date :- Sign. Of applicant Sign. Of counselor