CENTRE OF EXCELLENCE FOR DIFFERENTLY ABLED STUDIES

(A Unit under LBS Centre for Science and Technology)
(A Government of Keralam Undertaking)
Poojappura, Thiruvananthapuram-695 012, Kerala
Phone:0471-22345627 Website: ceds.kerala.gov.in/
Email:cedstvpm@gmail.com

APPLICATION FORM FOR D-SKILL COURSE

Affix a recently taken Passport size photograph of the Applicant

Application No	

1.Name of Course applier for	
2.Name of Applicant (BLOCK LETTERS)	
3.Age & Date of Birth	
4.Permanent address	
5.Address for communication	
6.Phone No	
7.Name of Parent/Guardian	
8.Religion & Caste	
9.Category(SC/ST/OBC/GEN)	
10.Type of Disability (*Attach Medical Certificates)*	
11.Distance from the place of residence to the Institution & mode of conveyance	
12.Educational Qualification	
13.D-Skill Courses attended earlier	
14.Proof identity attached (Copy of SSLC / Passport/ Aadhar card/ Other)	

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief.

Place:
Date:

Signature/Thump impression of Applicant

FOR OFFICE USE ONLY

Course admitted :

Date of commencement of the course:

Signature
Director in-charge/
Course Co-ordinator