



# - Tech Computer Education

Regd. By Govt. of India

Regd. No. 415

Bawal Chowk, Opp. Brass Market, Near Shethi Hospital, Rewari

Mobile No. 9466411127 / 9050023007

## APPLICATION FORM

Paste Your  
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To  
Hon'ble Director C-Tech  
Sir,

Registration No. : .....

Application For : .....

Name of Applicant : .....

Father's Name : .....

Mother Name : .....

Date of Birth : .....

Gender : .....

Category : .....

Aadhar Card No. : .....

Permanent Address : .....  
.....  
.....

Mobile No. : .....

Email ID : .....

Education Qualification : .....


**DECLARATION & UNDERTAKING**

I declare that the particulars given above are correct. I fully understand that my admission will stand cancelled if it discovered at any stage that I do not have the minimum qualification and any information supplied by me is found to be false. I agree to abide by the provisions of C-Tech Computer Education statutes, ordinances and rules and regulations framed there under by the Institute. I undertake that if my employment from the organization, which has sponsored me, is discontinued due to resignation/termination, and then I will not be eligible to take examination without getting No Objection Certificate from the sponsored organization.

I hereby confirm that I will regularly visit and all information relevant to my opted course will be received by me. Further I will never claim to send any information and document by post, E-mail or SMS. Therefore, only I will be responsible for all types of consequences, if don't visit. I also undertake not to demand refund fees/charges paid by me.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Applicant

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**FOR OFFICE USE ONLY**

Received with thanks duly filled in Application form for.....course from  
.....along with Receipt No.....for Rs.....towards Admission  
Fee and Course Fee.

For C-Tech Computer Education

Managing Director