



## FRANCHISEE REQUIRE FORM

School Education  Computer Education  Distance Education  Tutorial Education  Arts & Music Education

(Fill up the form in BLOCK LETTER)

(Use Tick mark only)

### A. PERSONAL DETAILS

1. Name :

2. Father's Name :

3. Date of Birth :    4. Sex : Male  Female  (Use Tick mark only)

5. Educational Qualification :

6. Other Qualification :

7. Mobile No. :  8. Monthly Income : Rs.

9. Email ID :

PHOTO

### B. FULL ADDRESS OF THE APPLICANT

10. Vill./Town :

11. Dist. :  12. City :

13. State :  14. Police Station :

15. Pincode :       16. Post Office :

### C. AREA INFORMATION (Where you wish to start a Training Institute?)

17. Location (Vill./Town) :

18. Land Mark :

19. Dist. :  20. City :

21. State :  22. Police Station :

23. Post Office :  24. Pin Code :

### D. ROOM INFORMATION

25. Room area in Square feet :

26. Other Information :

### E. DECLARATION

I Sri/Miss/Smti. \_\_\_\_\_ hereby declare that the particular given above are correct and complete. I acknowledge that i have read, understood and agreed to the terms and conditions.

Date of Application \_\_\_\_\_

Signature of the Applicant