

M-TECH CNC TRAINING CENTRE

(WORLD CLASS TRAINING ACADEMY)

DATE :

NAME :

FATHER NAME :

FATHER'S OCCUPATION :

ADDRES FOR COMMUNICATION :

QUALIFICATION :

NAME OF THE INSTITUTION :

YEAR OF THE COMPLETION :

EXPERIENCE (IF ANY) :

NAME OF THE INDUSTRY :

MOBILE NO :

E-MAIL :

DATE OF BIRTH :

COURSES PLANNING TO JOIN :

6 MONTHS	5 MONTHS	3 MONTHS	CNC	AUTO CAD/Pro-E	PLC/EMBEDDED	QUALITY ENGG
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(TICK THE DESIRED COURSE)

Need Placement Assistance: Yes/ No

When do you like to join? _____

How do you know about M-TECH-CNC?

Ex-student	Wall posters	Friends	Banners	College seminars	Other(specify)

If this course details needed for your friends specify their name and contact no:

Consoled by _____ Time _____ Remarks _____