

**APPLICATION FORM FOR ENROLLMENT TO SEEK ADMISSION FOR THE
WOODWORKING TRAINING COURSE AT AWTC, IWST, BANGALORE**

To,

The Director,
Institute of Wood Science and Technology.
P.O.Malleswaram, Bangalore – 560 003 (India).
Email: awtc_iwst@icfre.org

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| Name in Full (Block Letter) : | |
| Father's Name : | |
| Permanent Address : | |
| Telephone No.: | |
| E-Mail Address : | |
| Date of Birth : | |
| Age : | |
| Qualification and Year of passing : | |
| Field of Experience and No. of Years | |
| Employment details, if any : | |
| Languages known : | |
| To Read : | |
| To Write : | |
| To Speak : | |
| Training Course in which seeking admission (Tick the course) | 1. Conventional Training Course [] 2. CNC Training Course [] |
| Batch and date of joining the course | Batch No. : Date of Joining: (please refer the course schedule in AWTC, IWST website: http://iwst.icfre.gov.in) |

Date:
Place:

Signature of the Applicant