



RAY Foundation

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“350 Hours Pre-Service Teachers Training Program”

REGISTRATION FORM

FILL IN BLOCK LETTERS

Form no.....

1. a. Name of the Candidate: Mr. /Miss/Mrs.....

b. Marital Status: Unmarried/Married/Widow(er)/Divorced/Separated

2. a. Mailing address.....

E-mail.....

Phone..... Mobile.....

b. Permanent address.....

3. a. Date of Birth.....

b. Age.....

c. Sex: M... F...

d. State.....

e. Nationality.....

f. Religion.....

4. a. Father’s/Husband’s Name.....

Occupation/Designation.....

b. Mothers Name.....

Occupation/Designation.....

5. Educational Qualification after 10+2.....

Educational degree and year	Name of the institute	Marks obtained	Percentage

Please affix your photograph here



6. Mention the Awards / Scholarship/Academic distinctions received, if any (attach photocopies of the certificates)

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7. Past work experience

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8. Mention languages you can speak/write

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9. Hobbies

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10. Autobiographical Statement (between 3-4 self written pages). It should cover your

- a) Family background c) Major Experiences in life
- b) School and college d) Reasons for choosing the certification program

11. Experience from..... To.....

Name of Employer(s).....

Last Designation

Salary.....

Reason(s) for Leaving.....

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For Office Use Only

DECLARATION

1. I have fully read the prospectus and have noted the requirements laid down for the satisfactory completion of the course.
2. I clearly understand that on the completion of my 350 hrs training, when placed with the organization, the job may require outstation travel.
3. I certify that the above statements are true. I understand that withholding of any material fact or giving false information shall disqualify me from admission/placement opportunity.

Date

Signature of the Applicant

ENCLOSURES

Attested copies for office use only

- 1.
- 2.
- 3.
- 4.