



भारतीय सूचना प्रौद्योगिकी संस्थान, नागपुर

Indian Institute of Information Technology, Nagpur

“An Institution of National Importance by an Act of Parliament”

S.No. 140,141/1 Behind Br. Sheshrao Wankhade Shetkari Sahkari Soot Girni,
Village - Waranga, PO - Dongargaon (Butibori), District - Nagpur (Maharashtra) –

Website: www.iiitn.ac.in Email: director@iiitn.ac.in, registrar@iiitn.ac.in Phone: 9405215010

ANNEXURE -1

PRESCRIBED APPLICATION FORMAT – APPRENTICESHIP TRAINING

Advt. No.: IIITN/ADMIN/APPRENTICE/2023-24/01

Date: 06/12/2023

Application for Apprenticeship as	Graduate Apprentice / Technician Apprentice (Please strike out which is not applicable)
Discipline (Lib. Science/ BSc/BCom/ BA/ Civil Engg/ Electrical Engg.)	

Affix Coloured
Passport Size
Photograph
signed across

Category (A) : UR SC ST OBC EWS (Tick one, as applicable)
(B) : PWD (Tick, if applicable)

1.	Name in Capital Letters	
2.	Date of Birth (DD/MM/YYYY)	
3.	Gender	
4.	Age in Years as on 26/12/2023	
6.	Nationality	

7. Address for Correspondence :

.....
.....
.....

8. Contact / Mobile No. : _____ Email ID : _____

Signature of the Applicant



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Qualification	Discipline	Name of the Institute and University	Month & Year of Passing	% of Marks/ CGPA	Class/ Division
10 th					
12 th or Diploma (Attach all semester Marksheet)					
9. Graduation (Attach all semester Marksheet)					
Post Graduation					
Others, if any					

10. Whether undergone OR currently undergoing Apprenticeship under Apprenticeship Act, 1961 : Yes / No

11.	Any other Relevant Information such as Computer Knowledge and Skills, Work Experience etc which have not been included under the heads given above.	
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DECLARATION

I hereby, solemnly declare that the information furnished in this application are true and correct to the best of my knowledge and belief. If at any time I am found to have concealed/ suppressed any material/ information or have given any false details, my training shall be liable to be summarily cancelled / terminated without any notice or compensation.

Place:

Date:

Signature of the Applicant
Name: