

C-DAC's
Advanced Computing Training School
C-DAC Innovation Park
Sr. No. 34/B/1 Panchvati, Pashan
Pune – 41100 Maharashtra, India.
Email: actssupport@cdac.in - Visit us at : acts.cdac.in



Diploma in Advanced Computer Arts

Application Form for August 2019 Batch

Please read the **Instruction Sheet** before filling this Application Form

- Incomplete forms & Form not attached Photographs will be REJECTED
- Please leave the fields blank; which are not applicable.

25 x 30 mm
(Stamp Size)
Recent
Photograph **ONLY**
with Applicant's
Signature affixed
across the
Photograph.

1. **Entrance Test City: MUMBAI**
(City where you appear for the C-DAC Common Entrance Test (CET))
2. **Name :** _____
Last Name First Name Middle Name
3. **Communication Address :** _____

City : _____
Pin Code: _____ **State:** _____ **Country:** _____
4. **Telephone No.:** _____
(STD Code) (Phone No.)
5. **Permanent Address :** _____

City : _____
Pin Code: _____ **State:** _____ **Country:** _____
6. **Telephone No.:** _____
(STD Code) (Phone No.)
7. **Mobile :** _____
8. **Email 1:** _____
9. **Email 2:** _____
10. **Date of Birth :** _____ / _____ / _____
(DD / MM / YYYY)
11. **Gender:** Male / Female
12. **Marital Status :** Married / Unmarried
13. **Nationality:** INDIAN / Other : _____
14. **Religion :** _____
15. **Category:** _____
SC/ST/OBC/GEN

16. Academic and Professional Qualifications: Please refer to instruction sheet for Stream, Degree, Specialization & Qualification
(Please write one alphabet only **P/A**: **P= Passed / A= Appeared**)

Level	Stream	Degree	Specialization	Institute / School / College	University / Board	P / A	Year of Passing	Class & Marks%
Post Graduation								
Graduation								
Diploma								
Std. XII								
Std. X								
OTHER Duration in Months :								

DD Details /Online Transfer Details:

Name of the Bank _____

Branch _____

City _____

DD Number / Transaction UID details: _____

Date _____

Amount _____

I hereby declare that the information given above is true to the best of my knowledge. I have read the **Instruction Sheet, Course eBrochure** and shall abide by all the rules and regulations as prescribed by C-DAC ACTS and its Authorized Training Centres (ATCs) from time to time. I also understand and agree that the registration fee once paid by me is not refundable under any circumstances whatsoever.

Place : _____

Date : ____ / ____ / ____
(DD / MM / YYYY)

.....
(Applicant's Signature)