



SPA TECHNICAL TRAINING CENTER PVT. LTD.

(An ISO 9001:2015 Certified Institute)

Registered Under Ministry of Corporate Affairs (Govt. of India)

CIN: U85499UP2024PTC208492

ADMISSION FORM

Fill the Form in BLOCK CAPITAL LETTER (English) Using BLUE/BLACK Ink only

STUDY CENTER CODE:

COURSE NAME:

ADMISSION DATE: / /

1. Full Name (as per applicant (as per certificate):

2. Father's Name (as per certificate):

3. Mother's Name (as per certificate):

Date of Birth: / / ☐ Gender ☐ Male ☐ Female ☐ Other

8. Complete Address for Correspondence (do not repeat name)

State

Pin Code

Pin Code

Mobile

Mobile Number

QUALIFICATION DETAILS

Examination Passed

Name of the
Institute/University

☐ Year

☐ Total Marks

☐ Aadhar Card

☐ Photo (Passport Size)

☐ Last Qualification & Certificate

☐ Other:

DECLARATION BY THE APPLICANT

☐ Aadhar Card

☐ Photo (Passport Size)

☐ Last Qualification & Certificate

☐ Other:

FOR OFFICE USE ONLY

I Have Read All The Rules and Regulation Of The Institute And The Above Information Is True And Correct To Knowledge And Belief and Fully Understand That My Admission Will Be Cancelled If Any Information Is Found To Be False Or Twisted.

RECEIVING DATE

SERIAL NO

INVOICE NO.

FEES RS.

Student Signature
In Institute With Stamp