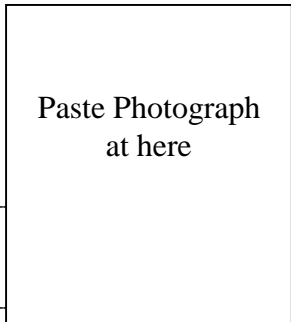


ONE DISTRICT ONE PRODUCT
REGISTRATION/ADMISSION FORM
(Please fill in Block Letters)



Course Name with dates: - _____

Name :- _____

Father's Name :- _____

Date of Birth :- _____

Educational Qualifications: - _____

Category :-SC/ST/OBC/General: _____ Sex :-M/F _____

Religion: - :- _____ Are you a Physically Handicapped: - Yes/No

Address :- _____

District _____ State _____

Phone/Mobile :- _____

Aadhaar Card No. :- _____

E-mail :- _____

Company's Name (if any) & Designation:- _____

Present Occupation & its duration :- _____

Current Turnover :- _____

I/We am/are enclosing D.D./NEFT/Cheque No. _____ for Rs. _____

Bank Name _____ as registration fee for
the above course in favour of "FFDC" payable at Kannauj.

Date: _____

Signature

Fee Receipt No. :- _____ (Official use)

**Note: -Please enclose identity and matriculation/10th level certificate along with the registration form.
Photograph is mandatory along with the form.**