**Natesan Institute of Cooperative Management, Chennai-40**

**Nodal Training Institute**

**APPLICATION FOR TRAINING PROGRAMME ON AGRI CLINICS & AGRI BUSINESS CENTERS, UNDER GOVERNMENT OF INDIA SCHEME**

**FORMAT FOR CANDIDATES TO ENROLL AS TRAINEES**

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of the candidate** |  |
|  | **Name of Father/Spouse** |  |
| **2.** | **Date of Birth** |  |
| **3.** | **Sex (Male / Female)** |  |
| **4.** | **Permanent Address** |  |
|  | **Village and Panchayat** |  |
|  | **Block and/or Tehsil** |  |
|  | **District** |  |
|  | **State** |  |
|  | **PIN code** |  |
|  | **Address for Correspondence** |  |
| **6.** | **Educational Qualification** |  |
|  | **Name of the Degree / Diploma / Certificate /**  **Course** |  |
|  |
|  | **Board/Institute/University where studied** |  |
|  | **University to which Affiliated** |  |
|  | **Marks / Grade obtained** |  |
|  | **Year of passing/completion** |  |
| **7.** | **Contact details** |  |
|  | **Telephone/Mobile** |  |
|  | **Email** |  |
| **8.** | **Experience** |  |
| **8A.** | **Family Background** |  |
|  | **Agriculture** |  |
|  | **Other than agriculture** |  |
| **9.** | **Agri-Business interest** |  |
|  | **Nature of enterprise being planned to set up**  **after the training** |  |
|  | **Experience in the enterprise being planned** |  |
|  | **Likely place of establishment of enterprise** |  |
| **10.** | **Aptitude for extension work with brief details**  **of extension work done and vision for future**  **in serving farmers** |  |

**Date: Signature:**