

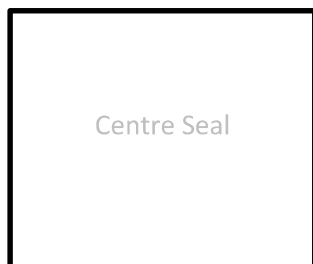
BENGAL INSTITUTE OF TECHNICAL EDUCATION

PMGDISHA

Application Form for Training Centre

1. Name of Center :-	<input type="text"/>		
2. Name of Incharge :-	<input type="text"/>		
3. Phone Number :-	<input type="text"/>		
4. E mail ID :-	<input type="text"/>		
5. Educational Qualification:-	<input type="text"/>		
6. Address :-	<input type="text"/>		
Pin code :-	<input type="text"/>	Block :-	<input type="text"/>
Panchayet :-	<input type="text"/>	Village :-	<input type="text"/>
District :-	<input type="text"/>	State :-	<input type="text"/>
7. Name of A/C Holder:-	<input type="text"/>		
Bank A/C No :-	<input type="text"/>	Bank Name :-	<input type="text"/>
Branch :-	<input type="text"/>	IFSC Code :-	<input type="text"/>
8. Name of Faculty :-	<input type="text"/>		
Contact No :-	<input type="text"/>	Email ID:-	<input type="text"/>
Edu. Qualification :-	<input type="text"/>		

Declaration:- I'm, centre in-charge of mentioned Centre, wish to work as a training centre of PMGDISHA under Bengal Institute of Technical Education. I also declare that I will abide by instructions of BITE to run this mission otherwise decision of BITE will be final.



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Signature with designation Stamp