



# CENTRAL INSTITUTE OF TOOL DESIGN

(Govt. of India Society - Ministry of MSME)

BALANAGAR, HYDERABAD - 500 037. A.P. INDIA

Phones : 040-23771959, Dir : 040-23776156, Fax : 040-23772658

An ISO 9001:2008, ISO 29990:2010 & ISO 14001:2004 Certified Institution



स्थापित: 1970  
ESTD : 1970

(For Office use only)

Application No. \_\_\_\_\_

H.T.No. \_\_\_\_\_

Affix recent  
Passport Size  
Photo duly  
attested by a  
Gazetted Officer

## APPLICATION FORM FOR \_\_\_\_\_ COURSE

(To be filled in CAPITAL Letters only)

1. Name :


2. Gender :

3. Date of Birth:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

AGE:

4. Father /  
Guardian  
Name :


5. Mother  
Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

6. Father  
Occupation:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

7. Caste Category:  
(Tick)

SC	ST	BC	OBC	Minority	General
----	----	----	-----	----------	---------

8. Are you physically Challenged:

YES	NO
-----	----

9. Permanent Address:

Phone:										Email ID:										

10. Family Annual Income: Rs.

--	--	--	--	--	--	--	--	--	--

(Latest Income Certificate from MRO to be enclosed for SC/ST and BC category candidates)

11. Whether Integrated Caste Certificate with Sub-caste group enclosed:

YES	NO
-----	----

(Attested copy of certificate to be enclosed for SC/ST and BC category candidates)

**12. Academic Qualifications :**

Name of Exam.	Institute / University	Month & Year of passing	%of Marks	Division

**13. Particulars of Application Fee paid :** Bank Challan / D.D. No. \_\_\_\_\_ Dt. \_\_\_\_\_  
drawn on \_\_\_\_\_ Amount Rs. \_\_\_\_\_  
Bank

**DECLARATION**

I do hereby declare and confirm that the particulars furnished above are correct to the best of my knowledge and belief. In case, the above particulars are found incorrect at any future date, I am aware that I am liable for any action the Institute may take against me including termination of the course without further notice and forfeiture of fee paid by me. I shall abide by the Rules and Regulations of the Institute in case of my selection to the course.

Station :

Date :

Signature of the Applicant

I shall be responsible for his / her conduct, payment of fees and good behaviour during the period of the course.

Station :

Date :

Signature of Parent / Guardian

**NOTE :**

1. Please enclose attested true copies of the certificates issued by the competent authorities in respect of Sl.No.s 3,7,8,10,11
2. Candidate is advised to give particulars of Application fee paid.
3. Please enclose one self-addressed envelope with Rs. 5/- postage stamps affixed and also one self-addressed post card for acknowledge the receipt of application.
4. Incomplete application will be summarily rejected.

For Office Use Only	
The candidate is eligible / not eligible for following reasons	
	Yes No
1. Qualification	
2. Minimum marks in the qualifying exam	
3. Age	
4. Caste Certificate	
5. Any other (Specify)	

Application accepted / rejected

Director (Trg.)

**CERTIFICATE**

(To be submitted by applicants of PDTD course only)

This is to certify that the Diploma course conducted by this Institute is recognized as equivalent of Diploma in Mechanical Engineering for pursuing further studies, vide G.O. Ms. No..... dated..... (attested xerox copy to be enclosed) of State Board of Technical Education & Training,.....State).

Principal / HOD

---

**SPONSORSHIP FORM-CUM-EXPERIENCE CERTIFICATE**

(To be submitted by applicants of sponsored category only)

Mr. / Ms.....

S/o / D/o..... is presently working in our

Organization as.....

from (date) .....

We sponsor Mr. / Ms. .... to undergo PGTD / PDTD full-time course at CITD, Hyderabad. We will not withdraw him/her before completion of the course.

Date :

Proprietor / M.D.  
(with seal)



सूक्ष्म, लघु और मध्यम उद्यम  
MICRO SMALL & MEDIUM ENTERPRISES  
MSME - TOOL ROOM, HYDERABAD

## CENTRAL INSTITUTE OF TOOL DESIGN

(Govt. of India Society - Ministry of MSME)

BALANAGAR, HYDERABAD - 500 037. A.P. INDIA

An ISO 9001:2008, ISO 29990:2010 & ISO 14001:2004



स्थापित: 1970  
ESTD: 1970

Certified Institution

No.

### ATTENDANCE SHEET

Affix recent  
Passport Size  
Photo duly attested  
by a  
Gazetted Officer

Hall Ticket No.

1. Name of the Course : \_\_\_\_\_
2. Exam Centre : \_\_\_\_\_
3. Day, Date & Time : \_\_\_\_\_
4. Name of the Candidate : \_\_\_\_\_  
(in block letters)
5. Signature of the Candidate : \_\_\_\_\_
6. Signature of the Invigilator : \_\_\_\_\_



सूक्ष्म, लघु और मध्यम उद्यम  
MICRO SMALL & MEDIUM ENTERPRISES  
MSME - TOOL ROOM, HYDERABAD

## CENTRAL INSTITUTE OF TOOL DESIGN

(Govt. of India Society - Ministry of MSME)

BALANAGAR, HYDERABAD - 500 037. A.P. INDIA

An ISO 9001:2008, ISO 29990:2010 & ISO 14001:2004



स्थापित: 1970  
ESTD: 1970

Certified Institution

No.

### HALL TICKET

Affix recent  
Passport Size  
Photo duly attested  
by a  
Gazetted Officer

Hall Ticket No.

1. Name of the Course : \_\_\_\_\_
2. Exam Centre : \_\_\_\_\_
3. Day, Date & Time : \_\_\_\_\_
4. Name & Address for  
Communication : \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
Pin : \_\_\_\_\_

DIRECTOR (Trg.)