

 <p>सत्यमेव जयते</p>	<p>GOVERNMENT OF ARUNACHAL PRADESH OFFICE OF THE DEPUTY COMMISSIONER ITANAGAR CAPITAL COMPLE 0360-2292199/2212164 (O) Fax: 0360-2292089 dcitanagar@gmail.com/dc-cc-arn@nic.in</p>	<p>DC</p>
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Advertisement

North East Frontier Headquarters ITBP in collaboration with District Administration Capital Complex, Itanagar is organizing Skill development training for Unemployed Youths of Arunachal Pradesh in the following categories at North East Frontier Headquarters ITBP Khatting Hills, near Arunachal Police HQ, Ganga village, Itanagar.

Sl. No.	Name of Vocational Courses	Education Qualification	Batch Strength	Duration of Course	Responsibility/Venue to conduct courses
1.	A) General Automobile Workshop Course B) Welding Course C) Fitter Course	10 th Pass	20	03+03+03 Weeks	North East Ftr Itanagar
2.	Tailoring Course	Open to All	20	12 Weeks	North East Ftr Itanagar
3.	Plumbing Course	8 th Pass	20	03 Weeks	North East Ftr Itanagar

Course will commence in the end of Septembert,2018 tentatively. Interested candidates may download forms from www.itanagar.nic.in and submit the duly filled application with documents at DC Office Itanagar before 17th September 2018. The exact date of the commencement of the course would be intimate accordingly.

Note: - The candidates should be physically and medically fit. They have to submit their character certificate from nearest Police station.

Sd/-
Deputy Commissioner,
Itanagar Capital Complex,
Itanagar

SKILL DEVELOPMENT TRAINING FORM

Application for (Course Name):

1. Full Name : -.....
2. Date of Birth : -.....
3. Father's Name : -.....
4. Gender : -.....
5. Email Id. :-.....
6. Mobile No. :-.....
7. Aadhaar No. :-.....
8. E/Qualification :-

Affix Photo
(Do not Staple)

Sl.No.	Qualification	Year of Passing	Division

9. Permanent Address: -
Village:.....Town/ City :.....
District :.....P.S.:..... P.O :.....
Pin Code :..... State:.....

10. Correspondence Address: -
Village:.....Town/ City :.....
District :.....P.S.:..... P.O :.....
Pin Code :..... State:.....

DECLARATION

I, hereby declare that the above information provided by me are true to best of my knowledge. If any mismatch occurs during the verification my candidature can be rejected.

Signature of the Applicant