

Appl. No. \_\_\_\_\_



## SHANTI CONSULTING ENGINEERS

### HSE TRAINING INSTITUTE

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Photo

### Admission Form

**One-month (online evening classes) Certificate Course for Supervisors working in Hazardous Process Industries, under section 41-C (b) of the Factories Act, 1948**

#### PERSONAL DETAILS:

Name

Father's Name

Surname

Present Address:

Permanent Address:

Date of Birth:

Age:

Sex: (Male/Female)

Citizen of:

Mother Tongue:

Phone Number:

Mobile Number:

Office:

Residence:

Email ID:

#### **PRESENT EMPLOYMENT DETAILS:**

Organization:	
Department	
Designation	
Nature of Work & Responsibilities:	

#### **WORK EXPERIENCE (PAST- in reverse chronological order)**

Organization	Designation	Department	Nature of Job	Period (dd/mm/yy) From- To

**QUALIFICATIONS**

Examination Passed	Institution	Year of Passing	Division

**PROFESSIONAL TRAINING PROGRAMMES/CONFERENCE ATTENDED**

Title of Training/Conference	Organized by	Year

**LANGUAGES KNOWN** (Tick in relevant columns if you have a working knowledge)

No.	Language	Speak	Read	Write

**EXPERIENCE AND TRAINING REQUIREMENTS**

Briefly write on your working experience and training requirements

**DECLARATION BY THE APPLICANT**

- I hereby declare that the information given in this application form is true and complete to the best of my knowledge and nothing has been concealed or distorted.
- I agree to attend the course as per the curriculum & confirm to have regular attendance.
- Any conflict will be the discretions of SCE, Baroda/DGFASLI & subject to Baroda jurisdiction.

Date:

Signature:

**RECOMMENDATION/ OFFICIAL DECLARATION**

We here by confirm, to allow the applicant to attend this training course as per the course schedule.

Name of the Official:

Designation:

Signature:

Seal:

**FOR OFFICE USE ONLY:** ADMITTED / NOT ADMITTED.

FEES PAYMENT DETAILS:

RECEIPT NO: