

# APPLICATION FOR PARTICIPATION IN ESDP TRAINING COURSE

To

The Director  
MSME-DEVELOPMENT INSTITUTE,  
Harsiddh Chambers,  
4th Floor Ashram Road, Ahmedabad - 380 014

PASTE  
RECENT  
PASSPORT  
SIZE  
PHOTO

SUB: ENTREPRENEURSHIP & SKILL DEVELOPMENT PROGRAM (ESDP)

TRAINING ON .....

Sir,  
I wish to join the above training programme and requesting you to consider my application. My details are given below.

1) Name : Mr./Mrs./Miss: \_\_\_\_\_

2) Father's/Husband's Name : \_\_\_\_\_

3) Full Address : \_\_\_\_\_

Tel. No.: Landline: \_\_\_\_\_ Mobile : \_\_\_\_\_

5) Date of Birth (Enclose proof) : \_\_\_\_\_

6) Qualification (Enclose proof) : \_\_\_\_\_

7) Experience, if any : \_\_\_\_\_

8) Whether SC/ST/OBC/PH. (Enclose proof) : \_\_\_\_\_

9) Product group selected for manufacturing : \_\_\_\_\_

10) Own investment capacity : \_\_\_\_\_

11) Other resources for setting up Industry, if any: \_\_\_\_\_

12) Details of course fee

a) Amount- \_\_\_\_\_ b) Mode of pay – CASH/ DRAFT \_\_\_\_\_

c) Draft No.- \_\_\_\_\_ d) Bank- \_\_\_\_\_

I, do hereby declare that the particulars given above are true to the best of my knowledge & belief.

Date:

Place:

(Signature of the Applicant)

FOR OFFICIAL USE ONLY

Received on with / without course fee

Application No.

(Signature of the course coordinator)  
MSME-DI, Ahmedabad