



NATIONAL BOARD OF VOCATIONAL AND PROFESSIONAL EDUCATION (UNDER AEGIS OF SHARON MEDICAL ADVANCEMENT AND RELIEF TRUST(SMART))

*REGD. BY GOVT. OF AP, UNDER THE INDIAN TRUST RN ACT 1908, NO.BKIV287/2006, DT.31-05-2006.
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REGISTERED WITH THE MINISTRY OF MSME GOVT. OF INDIA, UDYAM R.NO.UDYAM-AP-23-0028517,DT.10-09-2024.
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REGD. BY THE MINISTRY OF LABOUR AND EMPLOYMENT GOVT.OF INDIA UNDER NATIONAL CAREER SERVICES.ID-NO.P20J86-0121453252680.

RE- REGISTRATION FORM

Register Number : _____

Student Name : _____

Course Name : _____

Appearing Year/Sem. : _____

Father's Name : _____

Date of Birth : _____ (DD/MM/ YYYY)

Last Exam Appeared : _____

Contact Number (Mob / Whats App: _____

E-mail : _____

Paste Your
Recent Color
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-Attestation.
Don't Pin
or Staple

Signature of the Student

Enclosures:

- 1) Previous Year / Semester Mark Sheet Photo Copy
- 2) Demand Draft of Course Fee

OFFICE USE ONLY

Centre Name & Code:

Date:

Verified and Checked,

Coordinator Signature with Seal