



ALL INDIA MAHATMA GANDHI COMPUTER LITERACY MISSION

अल इंडिया महात्मा गांधी कम्प्यूटर लिटरसी मिशन

An Autonomous Body Registered Under N.C.T. New Delhi, Govt. Of India

Course Registered Under C.R. Act Ministry of Commerce and Industry Govt. Of INDIA

An ISO 9001:2015 Certified Organization

Web :- www.aimglm.org Email :- aimglm@gmail.com

Registration No:- _____

Admission Form

Please one recent
passport size
photograph

Student's Details: -

Full name of the applicant: (as per academic certificate)

Date:- _____

Date of Birth						Caste				BPL		Nationality							
Aadhaar No										Marital Status						Sex			
E-mail										Religion									
Contact No										Contact No									

Guardian Details: -

Father's Name of the applicant: (as per academic certificate)

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

Mother's Name of the applicant

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

Contact No						Contact No					
------------	--	--	--	--	--	------------	--	--	--	--	--

Applicant Address Details: -

Course Details:-

Course Name						Duration						Code					
-------------	--	--	--	--	--	----------	--	--	--	--	--	------	--	--	--	--	--

Centre Details:-

Centre Name																		
Centre Code						Centre Address												

Academic record:-

Examination	Name of Board Council / University	Year of Passing	% Marks	Grade / Division
Bellow 10th / 10th / equivalent				
Higher Secondary / equivalent				
Graduation / equivalent				

I Certify that, the information given above is true and
I promise to abide by the rules and discipline of the AIMGLM.

I certify that, the above candidate is joined in our course and
I promise to abide by the rules and regulation of the Head Office.

Signature of Applicant

Sign. & Seal of Centre Director

ALL INDIA MAHATMA GANDHI COMPUTER LITERACY MISSION

An Autonomous Body Registered Under N.C.T. New Delhi, Govt. Of India

Receipt Copy

Web :- www.aimglm.org Email :- aimglm@gmail.com

Date:- _____

Student's Name																		
Father's Name																		
Course			Duration					Year										
Centre Address																		
Centre Contact No																		

Sign. & Seal of Centre Director