



# COMPUTER CENTRE

UNIVERSITY OF KERALA

THIRUVANANTHAPURAM

Ph: 0471 – 2305801

## APPLICATION FOR ADMISSION TO IT ENABLED OFFICE AUTOMATION

1. Name of the applicant (In block letters)	
2. Designation	
3. Name of father/guardian	
4. Permanent address with pincode	
5. Official address with pincode	
6. Phone no:	
7. Nationality	
8. Age	
9. Sex	Male / Female
10. Academic qualification	
11. Details of other qualification	
12. Proficiency in computer area (Please mention the level)	
13. Any other relevant information	

### DECLARATION

I..... do hereby declare that the information furnished above is true to the best of my knowledge and belief.

Place :

Date :

Signature of Applicant