

V.O.CHIDAMBARAM COLLEGE, THOOTHUKUDI - 628008  
PLACEMENT – SOFT SKILL TRAINING – 2020  
REGISTRATION FORM



1. Name of the Student :
2. Department :
3. Registration No :
4. College No :
5. Email :
6. Mobile No :
7. Father's Name :
8. Father's Mobile No :
9. Address for Communication :
10. Educational Details :
  - X<sup>th</sup> std :
  - XII<sup>th</sup> std :
- Degree level, as on now : All Pass  Arrear
- No of Arrears :

Undertaking certificate

If I selected for the above said Training, hereby I am assuring that I will attend the classes positively without any absenteeism.

Signature of the Candidate

Department Placement Coordinator

Recommendation of the HOD

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For office use:

Selected / Not Selected

Batch No

Recommendation for Campus Interview