

TECHNOCATION

<u>Insitute of Software Trainings</u>



<u>Photo</u>



+923085145822

Name of Student :	Student-CNIC :
Father/Guardian Name :	Father/Guardian-CNIC :
Date of Birth :	Email :
Father/Guardian Profession :	Gender:
	Male Female
Contact (Personal) :	Father/Guardian Contact :
Permanent Adress :	
Education:	University/College Name :
Attach One Passport Size Photo Se	ession to
Attach CNIC/Father CNIC Copy	
Signature of Applicant:	Signature of
дрисант.	Father/Guardian :
T. 15	
Total Fee: Submitted Fee:	Remaining Fee: