PM SHRI KENDRIYA VIDYALAYA NO.2 KASARAGOD PMKVVY 4.0 ASSISTANT YOGA INSTRUCTOR COURSE Candidate Registration Form

Full Name(As given in AADHAR)	
AADHAR No	
Mobile No(Linked with AADHAR)	
Gender	
Date of Birth	
Email ID	
Fathers Name	
Mothers Name	
Social Category(SC/ST/Gen/OBC)	
Disability If any(Yes/No)	
Type of Disability	
Domicile State	
Domicile District	
Educational Qualification	
Permanent Address (including PIN Code)	

Signature of the Candidate:

Signature of the Parent: