

## Form - Financial Accounting Tally Program

## :: Contact Person Details ::

Name *	<input type="text"/>
Address *	<input type="text"/>
Email *	<input type="text"/>
Phone No *	<input type="text"/>

## APPLICANT DETAILS

Course Type *	<input type="text" value="- select -"/>
Name of the Student *	<input type="text"/>
Student Photo * Upload Photo (The same photo will appear on the certificate) (Width:270px; Height:200px;)	<input type="text" value="Browse... No file selected."/>
Father Name *	<input type="text"/>
Mother Name *	<input type="text"/>
Language *	<input type="text" value="- select -"/>
Date of Birth * e.g. YYYY-MM-DD	<input type="text"/>
Gender *	<input type="text" value="- select -"/>
Full Address with Pin No * (Please mention : At/Vill, PO,PS,Dist, Pin No, State)	<input type="text"/>
Mobile No *	<input type="text"/>

E-Mail Id \*

**SPONSORED INFORMATION AND FINAL SUBMISSION**

Sponsored Name \*

 Yes No

If Yes, Give the Sponsored Username