Om Sri Sairam  
**APPLICATION FORM  
Form No.  
 Date:**

** ACCOUNTS PACKAGE /  PLUMBING ELECTRICAL COURSES**

**Please Note : 90% Attendance is a must to receive course completion Certificate**

1. **NAME………………………………………………………………………**
2. **D.O.B………………………........................**
3. **MALE/FEMALE…………………………………………**
4. **EDUCATIONAL QUALIFICATION…………………………………………………..**
5. **MOBILE NUMBER………………………………………………………………………..**
6. **FATHER NAME …………………………………………Occupation ..................................**
7. **MOTHER NAME ……………………………………… Occupation ..................................  
     
   MOBILE NUMBER..FATHER/MOTHER..............................................................**
8. **Do you have Laptop? - Yes / No**
9. **What do you know about Sri Sathya Sai Seva Organisation?**
10. **Do you interested to attend the social service activities in the Sri Sathya Sai Seva Organisations?**

** Mobile Hospital Seva (Weekend)  
 Narayana Seva (Sunday Morning 6 am)   
 Puttaparthi Seva (10 days)  
 Temple cleaning (Weekend)**

** Gram Seva (Weekend)  
 Helping Tally next batch for teaching/practical (Weekend)**

1. **Your future contribution to our society**

**I hereby declare all the above details are correct and true of my knowledge. I’ll take full responsibility of the integrity of the data submitted. I agree to attend the SEVA organised by Sathya Sai Seva Organisations, Tamilnadu.**

**Signature of the Parent Signature of the Student**