Rajasthan Knowledge Corporation Limited

7 A, Jhalana Institutional Area, Behind R.T.O.,
Jaipur - 302004 (Raj.) Phone No. : +91-141-5159700

Admission Form for Admission to RS-CIT

Form No. : Date :

Name : Father's / Husband Name :

Date of Birth : / / (Date Month Year) Medium of Study : Hindi / English

Gender : Male / Female Marital Status : Single / Married

Address :

Suburb : City : Pin :

District : Taluka : Tele. No. : - (Area Code Number)

Mobile No. (Own) : Mobile No. (Other) : of

Email ID : Aadhar No. :

Type of Learner : GPF / CPF Number :

Education Qualification : Is passed? / Is appeared?

BPL : Yes / No Category : Physically Challenged : Yes / No

For office use only

Admission Date : / / (Date Month Year)

Joining Date : / / (Date Month Year)

Learner Code :

S.No.	Instalment Amount	Date	Receipt No.

Book Issue Date : / / (Date Month Year)

Signature of Student :

RS-CIT Exam Date : / / (Date Month Year)

Cert. Received from RKCL :

Cert. Issue Date : / / (Date Month Year)

Signature of Student :

(Photo)

(Sign)

Seal & Signature of
Center Coordinator