Nomination Form								
Select Course	Cor	Ms Word			Ms Exc	cel		
First Name		Mi	ddle Name	· · · · · · · · · · · · · · · · · · ·	La	st Name	·	
Name Hindi				Gen	nder Ma	le	Female	
Father's/Spouse's/Mother's, Guardian's Name								
Category	General	SC	ST	OBC	PWD			
Date of Birth			Education Qua	lification				
Service Grade /Rank								
Date of Joining / Last Promotion			Pay band					
Grade Pay / Scale of Pay			Service to which belongs					
Brief Service Particulars								
ORGANISATION DETAILS - OFFICE DETAILS								
Organisation Ministry Name					Organisation			
Organisation Email				Org	ganisation Pho	ne		
Organisation Street Address								
Organisation City Organisation Pincode								
Organisation State								
PERSONAL / RESIDENCE DETAILS								
Aadhaar Numb	er				PAN Number			
Email					Mobile No)		
Street Address								
City						Pincode		
State								
OTHER DETAILS								
Emergency Contact Details								
How the training is likely to benefit the nominee as well as the organisation (in 2 lines)								
Previous courses attended at ISTM (with dates in bracket)								
Whether Hostel Accommodation is required								
I certify that the above information is correct								