

**List of ST Candidate for Skill Development Project**

**Name of Training Partner:-**

**Training Centre Address:-**

Sr. No.	Full Name of Candidate (Surname first)	Gender	E-mail ID	Mobile No.	DOB (YY/MM/DD)	Tribe	Aadhar No.	Education	Parmanent Address			Course Type Residential/Non Residential	sector	Job Role	Documet Attached
									Village	Tahsil	District				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

Submitted By,  
Training Partner Signature with Stamp

Verified By,