



CORPORATE TRAVEL ASSIST® ACADEMY

ADMISSION FORM

Trimurti Building 2nd Floor, Brahma Avenue Road, Sr no. 61/1, Shivneri Nagar, Lane no.36,
Shivnerinagar, Kondhwa, Pune, Maharashtra 411048

PHOTO

Name:- _____

Address:- _____

Contact No:- _____ Emergency Contact No :- _____

e-mail ID:- _____

Adhaar Card No: _____ PAN No : _____

Date of Birth :- ____ / ____ / ____ / Gender:- M ☐ F ☐

Married: - Y ☐ N ☐ Spouse Name :- _____

Guardians Occupation :- _____

Languages Known :

English - Y ☐ N ☐ Written - Y ☐ N ☐ Spoken - Y ☐ N ☐

Hindi - Y ☐ N ☐ Written - Y ☐ N ☐ Spoken - Y ☐ N ☐

Marathi - Y ☐ N ☐ Written - Y ☐ N ☐ Spoken - Y ☐ N ☐

Education Qualification: 10th ☐ 12th ☐

Any Other:- _____

Computer Literacy : - MS-CIT - Y ☐ N ☐ If 'N' then please fill below

MS Word ☐ Excel ☐ Typing Speed WPM ☐ Internet use ☐

Work experience if any:- _____

Interpersonal skills :- _____

Health Questionnaire:

Have you any health conditions, impairments, or disabilities of which the Course Organizer and Coaches should be aware. Please specify if yes:-_____

Please give details of you are currently taking any form of medication?

Blood Group :-_____ **Covid 19 Test:- Y** ☐ **Date:**____/____/____/N ☐

Declaration:-

The information given above is correct to the best of my knowledge and if found wrong my academic training be cancelled and fees paid by me, be fortified. By signing below I agree that I have read and agreed to the terms and conditions of Corporate Travel Assist© Academy policy provided to me in PDF file.

Sign _____

Date - _____

Place_____