



**JAWAHAR INSTITUTE OF MOUNTAINEERING & WINTER SPORTS, NUNWAN, PAHALGAM
JAMMU & KASHMIR -192126**

APPLICATION FORM

(TO BE FILLED OR TYPED IN BLOCK LETTERS)

NOTE: INCOMPLETE FORMS WILL NOT BE ACCEPTED

TELE FAX : 01936 -243129 (TRG SEC) MOB : 9906967830 (TRG CLERK) MOB : 9906967821 (MED OFFICER)

E-mail: principal@jawaharinstitutepahalgam.com

1. Name _____
2. S/O, D/O, W/O: _____
3. Date of Birth _____ Sex _____
4. Occupation _____ Qualification _____
5. Permanent / Correspondence Address/ Unit Address _____
_____ Pin : - _____

Affix
Photograph
here

Telephone with STD Code _____ Mobile: _____ E-mail _____

6. Telephone with address and next of kin, Parent/Guardian.

Name _____

Address _____ Pin : _____

Telephone with STD Code _____ Mobile: _____ E-mail _____

7. Course to be attended- BMC/AMC/MOI/Adventure / Basic Skiing / Intermediate Skiing/Advance Skiing.

Course serial No. _____ From _____ to _____.

8. Vegetarian or Non-Vegetarian. _____

9. Shoe Size _____ Chest _____ Waist _____ Height _____

I have read the rules and regulations of JAWAHAR INSTITUTE OF MOUNTAINEERING & WINTER SPORTS, PAHALGAM-J&K relating to the courses of training in Mountaineering/Adventure / Method of Instruction/ Skiing and have fully understood the meaning and Significance of the same. The above entries have been made by me and they are true and correct

Date _____

Signature of Applicant _____

10. Nationality _____ (in case of private candidate must be certified by any Gazetted Officer).

Certified that I know the applicant and confirm that he / she is an Indian National

Date _____

Signature of Gazetted Officer

Place _____

(with seal)

11. I hereby certify that all the entries are correct in every respect. In case of deaths, accident or injury of any form, the Institute or any of its staff will not be held in any manner wholly or partially responsible.

Signature

Date: _____

Parent/Guardian _____