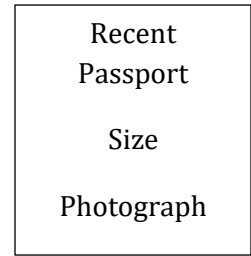


EXAMINATION FORM

AITT July - 2026

- 1. Name of ITI
- 2. ITI MIS CODE
- 3. Registration No
- 4. Name of Applicant
- 5. Date of Birth 6. Sex
- 7. Name of Father/Guardian
- 8. Trade 9. Duration of Course
- 10. Session 11. Category
- 12. Full Address



Subject	Session-2024-26 (2nd Year for Two Year Trade Course)	Session-2025-26 (For One Year Trade Course)	Session-2025-27 (1st Year for Two Year Trade Course)
Practical			

(Note: - Please mark tick (✓) in appropriate box)

DECLARATION

I hereby declare that the information given above is true and correct. I have total ____% attendance during my training period. I should be allowed to appear in AITT examination.

Date:

Name and Signature of the Applicant

.....
(For Office Use Only)

Total Working Day:

Total Present Day:

Percentage:

DECLARATION

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. The attendance of the said trainees is ____ (%).

The candidature of above trainee is verified by.

Signature of Trade Instructor

Signature of Group Instructor

Signature of Bill Clerk

Principal/ Principal In charge
(Seal of Institute)