



## CTAA Registration Form

CTAA Registration No: \_\_\_\_\_  
(For office use only)

### Section A: Identify Yourself

Student Name\*: \_\_\_\_\_  
Father's Name\*: \_\_\_\_\_  
Roll Number\*: \_\_\_\_\_  
Institution\*: \_\_\_\_\_

Campus\*: \_\_\_\_\_  
Degree\*: \_\_\_\_\_  
Batch Year\*: \_\_\_\_\_  
Year of Passing\*: \_\_\_\_\_



### Section B: Contact Details

#### Residential

Address\*: \_\_\_\_\_  
\_\_\_\_\_  
City\*: \_\_\_\_\_ State\*: \_\_\_\_\_  
Country\*: \_\_\_\_\_ PIN Code\*: \_\_\_\_\_  
Landline No. \_\_\_\_\_  
Mobile\*: \_\_\_\_\_  
Email Id\*: \_\_\_\_\_

#### Correspondence (Leave blank if same as residential)

Address\*: \_\_\_\_\_  
\_\_\_\_\_  
City\*: \_\_\_\_\_ State\*: \_\_\_\_\_  
Country\*: \_\_\_\_\_ PIN Code\*: \_\_\_\_\_  
Landline No. \_\_\_\_\_  
Mobile\*: \_\_\_\_\_  
Email Id\*: \_\_\_\_\_

### Section C: Employment Details

*Please fill in the appropriate column on the basis of your current status*

If "Entrepreneur", Name/Type of Establishment: _____ Current Role/Position: _____	If "Job", Name of Employer: _____ Current Designation: _____ Current Location: _____
If "Higher Studies", Name of University/Institution: _____ Name of Degree: _____ Current Location: _____	If "Others", Please Specify: _____

Any academic/professional achievement(s) you would like to mention: \_\_\_\_\_  
\_\_\_\_\_

(Student's Signature)

(HOD)

(CTAA Convener)