



## **STUDENT REGISTRATION FORM – CORPORATE PATHWAY**

Registration Form No: \_\_\_\_\_(For Office Use Only) Year of Registration: 20\_\_\_\_ - 20\_\_\_\_

Passport Size Photograph

					(Cross Signed)
1. PERSONAL DETAIL	.S				
Name :					- Alla
	First Name	N	liddle Name		Last Name
Father / Guardian Na	nme:				
		Name		Conta	ct Number
Correspondence Add	lress :			10,	
				71.	
Nearest Landmark :	·		City:		
State :	<u> </u>		Pin:		
Tal (Office)		. (	Dag		
rei. (Office)	STD Code	Number	Res.:STD (	 Code	Number
Downson and Address.		i Albi			
Permanent Address:				······································	
Nearest Landmark :	·		City:		
State :	$\nu_{a}$		Din		
Tel. (Office)	STD Code	Number	Res.:	 Code	Number
	SID Code	Number	3וטו	Loae	Number
Fax :			Mob.:		
	STD Code	Number		IN!	umber
Email ID					
Date of Birth :			Citizen: Indian	Foreig	ın 🗍
	(DD) (MM) (	YYYY)			
Gender :					
	Male Female				
VALID ID NO :			_Place of Issue:		
	Passport, Adhaar Card, Drivin	g License & Any other Vali			





## 2. ACADEMIC RECORD

Examination Level	Qualification	Board / University Institute	Medium of Instruction	Marks (%)	CGPA Attained	Year of Passing
High Secondary						' MOI
Bachelor's Degree						
Others					Chi	

3. EMPLOYMENT DETAILS	

Nature o	f Employment:	(Eg. Salaried,	Self Employed)
A. Curr	ent/Last Employment Details		
1.	Name of Organization		
2.	Turnover of the Organization (APPX)		
3.	Number of Employees working in the Organization	:	
4.	Type of Industry	:	
5.	Period of Work (Current)	: From	То
6.	Department	:	
7.	Designation Held	:	
8.	Number of People Directly Reporting to You	:	
9.	You report to (Designation)	:	
10.	Specific Functional Area of Work	:	
11	Roles and Responsibilities in the Occupation	:	





B. Pre	vious Employment Details	
1.	Name of Organization	:
2.	Turnover of the Organization (APPX)	:
3.	Number of Employees working in the Organization	
4.	Type of Industry	
5.	Period of Work (Previous)	: From To
6.	Department	
7.	Designation Held	
8.	Number of People Directly Reporting to You	
9.	You report to (Designation)	
10.	Specific Functional Area of Work	: / 1/1/
	ganization structure and reporting relationships grent position, upto two levels above and upto tw	(upward, downward, and dotted line) for candidate's wo levels below.
A. Name	of the Education Provider:	
Address:	ICK.	
Mode of Re	egistration: Corporate Pathway	
Mode of Le	earning: Classroom Se	elf Study Online / Webinar
4 B. Name	of the Corporate Member:	





## 5. DECLARATION

I wish to register for the CWM® Certification Program. I shall submit the following documents to the Education Provider along with the registration form failing which I Agree that my application for Student Registration will not be considered by AAFM India Pvt. Ltd.:

- 1 Duly filled Student Registration Form
- 2 Passport size photo
- 3 Education Passing Certificate (Duly Attested)
- 4 Valid ID Proof

I hereby declare that the above information provided by me is true and correct to the best of my knowledge, information and belief. I also agree to adhere to AAFM India Pvt. Ltd. guidelines and instructions. By this registration, I do hereby release AAFM India Pvt. Ltd. from all my claims whatsoever, present or future, which may be caused due to any act or omission by the Authorized Education Provider or otherwise. In case of any dispute which may arise between me and the education provider or AAFM India Pvt. Ltd., the same should be referred to Head – Operations (AAFM India Pvt. Ltd.) and the decision taken by the Head – Operations (AAFM India Pvt. Ltd.) shall be final and binding without any further claim.

further claim.		
Date : Place :	Signature of the Candidate	
	For Official Use Only (AAFM India Pvt. Ltd.)	
Approved By:		
Signature:		
Date:		
Remarks:		
CHECK LIST :- (Before send	ling your registration form please check ( $$ ) the following documents are enclosed with the form)	
Duly Self Attested Copies of Ma	rk Sheets: (HSC, Graduation, Post-Graduation, Additional Qualification, *Exp. Certificate)	
2 Passport Size Photographs in	Addition to the photo pasted on the registration form	
Current Profile (Updated Resur	ne)	
*	A*	

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<sup>\*</sup>Applicable to validate the experience of the candidate only