EFOS.in
Education Future One Stop

EFOS Skill Training & Placement Enrollment Form

A. PERSONAL DETAILS

Full Name (as per records):_____

Father's / Guardian's Name:_____

Date of Birth (DD/MM/YYYY): _____ Gender: □ Male □ Female □ Other

Mobile No.: _____ Email ID: _____

Address:

City: _____ State: _____ PIN: _____

B. ACADEMIC DETAILS

Class 10th
Board: _____ Year: _____ %: _____

Class 12th
Board: _____ Year: _____ %: _____

Graduation
Course:_____
University / College: _____
Year of Passing / Appearing: _____ %: _____

Final Year Student: □ Yes □ No (Expected Completion Year: _____)

C. ELIGIBILITY CONFIRMATION (✔ Tick All Applicable)

□ Minimum 50% marks in 10th, 12th & Graduation
□ Graduate of 2024–2025 batch / Final-year student
□ No academic gap of more than one year
□ Willing to accept placement post training
□ Agree to Assignment Round (Minimum 70% score mandatory)

D. SELECTION & TRAINING ACKNOWLEDGEMENT

□ I understand that selection is subject to:

Assignment qualification (≥70%)

Screening Interview

Mandatory 3-month on-campus training

Certification & placement support post training

E. CANDIDATE DECLARATION

I declare that the information provided above is true and correct.
I understand that any false information may result in cancellation of my candidature at any stage.

Place: _____ Date: _____

Candidate Signature: _____

Remarks: _____

Authorized Signatory: _____ Date: _____

Issued on behalf of
EFOS.in

Address: A147, Main Gate,
opposite Central School,
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201315