



# J. SONS MERCHANT NAVY INSTITUTE

(Duly Approved By D.G Shipping, Govt. of India)

## APPLICATION FORM

**BATCH NO.** : .....

(for Office Use Only)

**DATE:** .....

(All details are to be filled in capital letters only)

*Please Paste  
Your Photo  
Here*

1. Course Applied for : .....

**PERSONAL DETAILS:**

- a) Name of the Applicant : .....
- b) Surname of the Applicant : .....
- c) Date of Birth (as per valid document); .....
- d) Age as on date of Registration : .....
- e) Father's Name : .....
- f) Mother's Name : .....
- g) Religion : .....
- h) Place of Birth : Town.....  
District: .....  
State : .....
- i) Education Qualification : .....
- j) Passport Number (If Any) : .....
- k) Present/Permanent Address : .....
- (Please fill either of one) .....
- Pin Code : .....
- l) Phone Number with STD Code : .....
- m) Next of Kin : .....
- n) Visible Identification Mark : 1 .....  
2. ....

**3. INSTRUCTION TO THE CANDIDATES :**

Application form will not be accepted without the following enclosures:

- a. Attested copy of the proof of Date of Birth.
- b. Attested copy of the school leaving certificate.
- c. Attested copy of the Final examination Mark Sheet.
- d. Latest Passport size Colour Photographs (In white shirt) 04 Nos.
- e. Attested copy of the passport (If available)
- f. Physical fitness certificate.
- g. 2 Nos. self addressed stamped envelopes for acknowledgement form and interview call letter.

**4. DECLARATION :**

I hereby declare , to the best of my knowledge, that the information's given above is true. I am aware of the personal safety aspects to be maintained while under training and I do not suffer from any illness or disability that may hamper the various physical exercises to be carried out during the course as part of my training programme. I confirm that I shall maintain strict discipline and adhere to all safety precautions during the course. J Sons Merchant Navy Institute or any other organization involved in the training will not be held responsible in any way, for any incident or injury suffered by me during this course.

**DATE:**

**SIGNATURE OF APPLICANT**

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**FOR OFFICE USE ONLY**

The information furnished above is verified with original documents produced and found to be in order. The candidate is suitable for admission as per entry standards.

The candidate is admitted for the above course.

**OFFICER IN CHARGE**

**5. COURSE FEE DETAILS:**

Mode (Cash/DD No. & Date	Amount Paid (Rs)	Receipt No. & Date	Remarks