



# VISSION PROFESSIONAL EDUCATION TRUST

Approved by Director General of Shipping | An ISO9001-2008 certified institute by JAS-ANZ

Head Office & Institute at Jaipur (Raj.) Admission & Selection Center at Udaipur (Raj.)  
 Mo. 08829000183, Email : hmt.marine@gmail.com, Website : vmsjaipur.com  
 13-A, 13-B, R.K. Puram, Near Bypass Road, Titardi, Udaipur (RAJ.) 313002

Unit I - Vission Institute of Advance Technical Training

Unit II - Vission Institute of hotel management

## APPLICATION FORM

**Passport  
Size  
Photograph  
in white shirt  
and tie**

Form No.

Name .....

Date of Birth

Email .....

Gender  Male  Female

Father's Name .....

Father Profession .....

Mother's Name .....

Permanent Address .....

.....PIN ..... Contact No. ....

### Qualification Detail

Level	Board/University	Year	Percentage	Subjects

### Personal Detail

<b>Height</b>		<b>Weight</b>		<b>Complexion:</b>	
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<b>Language Known</b>	
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<b>Identification Mark</b>	
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<b>English Communication</b>	Fair <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>
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**DECLARATION BY APPLICANT**

I ..... confirm that the information documents submitted by me is true to the best of my knowledge. I have not given any material or information that could effect my Selection. I agree that if my mark sheet and other documents found fake, academy has right to take any kind of legal action against me. Also I have read and understood contents of the prospectus and agreed to all terms and conditions contained therein.

I agreed that If I cancel my reserved seat even before the commencement of the course or after admission if I withdraw/discontinue the course on my own decision or dismissed from the academy by the management for any reason, the fee whatever I paid will not be refunded and I am liable to pay the full course fee without any balance. Also I shall not claim for the refund of fee. I agree that after completion of my course, I will get foreign CDC (i.e. panama, Liberian & Belize). Also I understood & agree that I will get placement on the basis of my eligibility & performance during the training. moreover whatever charges are there for the industrial training or On-job training will be paid by me.

Date :

Signature of Applicant

**DECLARATION BY THE PARENTS**

I ..... undertake the responsibility of paying all dues of ..... in compliance with all rules and regulations that are enforced time to time by Vission Professional Education Trust.

Date :

Signature of parents/ guardian

**FOR OFFICE USE ONLY**

Selector for :

**Check List**

- 1. Attested copy of 10th/12th/Graduate passing certificate
- 2. Attested copy of Date of birth certificate
- 3. Medical fitness certificate
- 4. Two passport size photograph
- 5. One Full Length Photograph
- 6. Signature of Applicant
- 7. Signature of Parents/Guardians

**Verified by**

Note : Send Rs. 500/- DD on the Name of Vission Professional Education Trust Payable at UDAIPUR (Raj.)