



GLOBAL INSTITUTE

OF NONDESTRUCTIVE TESTING AND TRAINING

Head Office

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Eastern Business District /
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Bhandup (W)-400078
Email : info@globalndt.in
Website : www.globalndt.in
Contact : 9922884099 / 7741812340

REGISTRATION FORM

First name: _____
Last name: _____ Date: _____
Qualification: _____ Male/Female: _____
Date of birth: _____ Nationality: _____
Sponsored By: Self ☐ Company ☐ If Company _____
Address: _____
Mobile Number: _____ Place: _____

Course Applied: NDT LEVEL 1/2 ☐ HVAC ☐ QA / QC ☐
CORPORATE TRAINING ☐
Preferred Location: MUMBAI ☐ OTHER
Name of Collage/Organisation _____
Starting date: _____ End date: _____
Date of return: _____ Stay in days: _____
Training Month/Year Jan-20 ☐ Feb-20 ☐ Mar-20 ☐
April-20 ☐ May-20 ☐ June-20 ☐
If Other _____

Educational Qualifications (Please attach Xerox copies):

Sl No.	School/College	Exam/Course Passed	Year of Passing

Work Experience(Please attach Experience Certificates):

Sl No	Company Name	Duration	Designation	Responsibilities in Brief

Documents Required:

Educational Certificates, Experience Certificates, Eye Test Certificate & 2 Photos

Registration Fees:

INR 2000

Accommodation: Not Required
Hostel For Girls & Boys

☐ Required ☐
Non-AC @ INR 3500

From _____ To _____
AC @ INR 7000

I hereby certify that all the facts given with reference to my educational qualification and work experience are true to the best of my knowledge & belief and that I have not held any information which might be detrimental.

Pay Via

GooglePay/PhonePay/Paytm: 9922884099

Signature:

Note: Email this form along with required attachments & payment receipt to info@globalndt.in