

Last Date for submission of application is 25/02/2025



CENTRE FOR EDUCATIONAL DEVELOPMENT OF MINORITIES
Minorities Welfare Department, Govt. of Andhra Pradesh
Opp. Swathi Theatre, Bhavanipuram, Vijayawada – 520012.
Phone / Fax: 0866-2970567(O), email: cedmap2017@gmail.com

Affix
Latest Passport
Size
Photograph
(Mandatory)

Group-I (Mains)
FREE COACHING PROGRAMME

APPLICATION FOR REGISTRATION

1. Name of the Candidate : _____
(In Block Letters)
2. Father's Name : _____
3. Date of Birth : _____ 4. Age: _____ 5. Sex: Male / Female
6. Aadhaar Number : _____
7. Religion : _____
8. Educational Qualifications : _____
9. Medium of Instruction : English Telugu
10. Post Applied for : _____
11. Group-I Prelims Hall Ticket No : _____
12. Income (Below 6 Lakhs) : _____
(Certificate Mandatory)
13. Postal Address : _____

- Candidate Phone No. : _____
14. Permanent Address : _____

- Parent/Guardian Phone No. : _____
15. Preferred Coaching Center : _____
(Nearest/Allocated)

Date: _____

Signature of the Candidate

(FOR OFFICE USE ONLY)

Registration No & Date: _____

DIRECTOR

Project Associate/ Office Assistant: