**DIRECTOR** 



## **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** 

## **NEET-2025**

## FREE COACHING PROGRAMME APPLICATION FOR REGISTRATION

Affix Passport Size Photograph

	Name of the Candidate (In Block Letters)	<b>:</b>	
	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.	Intermediate Marks Scored	:	Ç
	NEET Online Application Number		
12.	Income (Below 6 Laksh) (Certificate Mandatory)	:	
13.	Postal Address	:	
	Phone No.		
14.	Permanent Address	:	
	Phone No.		
15.	Preferred Coaching Center (Nearest/Allocated)	:	
Dat	e:		Signature of the Candidate
	(FOR OF	FFICE USE ONLY)	
Reg	sistration No: & Date:		

**Project Associate/Office Assistant:**