NATIONAL APPRENTICE AND INDUSTRIAL TRAINING AUTHORITY – …… DISTRICT OFFICE

DROP OUT DETAILS OF APPRENTICES

Month:-…… Year:-……..

NAME OF THE APPRENTICE	CONTRACT NO.	GENDER (M/F)	TRADE & CATEGORY	NAME & ADDRESS OF THE ESTABLISHMENT	DATE OF COMMENCEMENT	LAST DATE REPORTED TO TRAINING	REMARKS (REASON FOR DROP OUT)

The above details / information are correct & certified.

Name :
Signature :
Date :