



Learner Enrollment Application



Personal Information

FIRST NAME:

MIDDLE NAME:

LAST NAME:

DATE OF BIRTH:

GENDER:

MALE

FEMALE

NATIONALITY:

INDIAN

OTHERS

EMPLOYMENT STATUS:

EMPLOYED

SEEKING EMPLOYMENT

PURSUING EDUCATION

EMAIL ADDRESS:

MOBILE:

ADDRESS LINE 1:

ADDRESS LINE 2:

CITY:

STATE:

PIN-CODE:

PREFERED LEARNING
CENTRE

ALTERNATE CONTACT



Academic Details:

List your previous institution/colleges, beginning with the most recent. If you are a post-graduate then mention the PG details followed by graduation.

INSTITUTION:

DEGREE:

UNIVERSITY

PERCENTAGE/GRADE:

INSTITUTION:

DEGREE:

UNIVERSITY

PERCENTAGE/GRADE

INSTITUTION:

DEGREE:

UNIVERSITY

PERCENTAGE/GRADE



Local Guardian Details: (Fill only if applicable)

GUARDIAN FIRST NAME

GUARDIAN LAST NAME

GUARDIAN ADDRESS LINE 1

GUARDIAN ADDRESS LINE 2

CONTACT NUMBER

GUARDIAN EMAIL

Kindly send the form duly filled to contact@timespro.com. Ensure that your name and mobile number are included in the e-mail