



APPLICATION FORM

(For admission in Full Time Programmes)

(Academic Session : 2025-26)

(Approved by Apparel, Madeups and Home Furnishing Sector Skill Council, Govt. of India)



Regn. No.
(To be filled by Office)

NORTHERN INDIA TEXTILE RESEARCH ASSOCIATION

(Linked to Ministry of Textiles, Govt. of India)

Sector-23, Raj Nagar, Ghaziabad-201 002, Ph.: (0120) 2807390-95.2783586/92

E-mail: mail@nitratextile.org Website: nitratextile.org

1. Program Applied for :
2. Name (in CAPITAL letters) :
3. Gender (Male/Female) :
4. Father's/Husband's Name :
5. Mother's Name :
6. Religion and Caste :
7. Date of Birth :
8. Mobile No.(whatsapp) : 9. Mobile No.(Father).....
10. Email :
11. Aadhaar No.

Paste your recent
color
photograph and
sign across the
photograph

12. Address for Correspondence	13. Permanent Address

14. Educational Qualifications (Mention all qualifications starting from latest to class 10th):

Examination	Name of the school/college	Board/ University/ Institute	Year of Passing	Subjects	%Marks obtained

15. Experience (Furnish details of employment, if any)

Sr. No	Name & Address of Organization	Designation	Duration	Job Responsibilities

16. If anyone from your family/relatives/friend has done any program from NITRA, please furnish the following information

Sr. No	Name	Relationship	Program	Year of Admission

17. References: Give TWO references who can be contacted in case of an emergency

Name :	Name :
Relationship:	Relationship:
Phone No :	Phone No :

18. Do you require hostel facility : YES /NO
(Hostel facility will be provided subject to availability)

19. Enclosures:

Candidates are advised to attach 1 SET of self-attested photocopy of following documents along with application form:

1. Self attested photocopy of Class X passing certificate
2. Self attested photocopy of Marksheets of Class X, XII, Diploma/Graduation
3. Self attested photocopy of Aadhaar Card
4. One recent color photograph (with your name on the back of photo)

DECLARATION

I hereby declare that the above-mentioned information provided by me is correct and true to the best of my knowledge. I further declare that I have gone through the information brochure and understood the information given therein and agree to abide by them.

Date.....

Place

Signature of the Applicant

-----**For Office Use Only**-----

Date of receipt of application form:

Sign:

Remarks: