Form 1C

Application for accumulation of new courses

INSTITUE OF VOCATIONAL EDUCATION- IVE, SKILL DEVELOPMENT ORGANIZATION,

To,		
THE DIRECTOR		
INSTITUE OF VOCATIONA	AL EDUCATION- IVE,	
SKILL DEVELOPMENT OR	•	
REGIONAL PROGRAM OI	FFICE,	
MAYILADUTHURAI,		
NAGAPPATTINAM DISTR	ICT	
SUB: Application for addition of new courses in existing center M/S		Reg.
Respected Sir/ Madam,		
_	urses to my present permitted courses to my	
	located at	from the academic year of
	e my payment of Rs	
DD drawn in	Bank in favour of " <u>IVE"</u> Chapte	er, Mayiladuthurai"
		Thanking You,
		Yours Sincerely,
		()
		Head of the Institution
M/S		
Address		