Registration Form for Bootcamp on Windows Forensic Analysis

(To be filled by the applicant/participant and maintained by the respective Institute)

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Resource Centre Name: C-DAC Thiruvananthapuram Technology: Cyber Security Role: C0-Lead Resource Centre				
Course Name		Windows Forensic Analysis		
Course Start Date	:	22 September 2025		
Applicant Name (as per Govt. ID)	:			
Date of Birth (DD-MM-YYYY)	:			
Gender	:			
Mobile Number	:			
Email ID (Official ID preferred)	:			
Native State	:			
District	:			
Government-issued ID Number ¹ (copy enclosed)	:			
Organization/Academic Institute (if applicable)	:			
Highest Qualification (with Degree & Branch)	:			
Status (Pursuing / Passed Out)	:			
Beneficiary Category (Tick as applicable)	:	☐ Career aspirant / Student ☐ Employment Seeker / Passed Out ☐ Non-IT Employee (cross-pollinated digital roles) ☐ IT Employee (IT & Non-IT Sector) ☐ PSE Employee		
Involved in previous FSP Program ²		Yes / No		
If previous answer is, yes provide details (Program Name / Conducting Institute / Date)	:			

I hereby declare that all the information provided above is true.

Applicant Signature

(For office purpose)

The above submitted information has been verified and recommended.

(Signature)

Course Coordinator

[•]¹Any of the Government issued ID: Photo identity card issued by the Central Government or a State Government or a Public Sector Undertaking, Driving License, Electoral Card, Ration Card, Aadhaar

^{• &}lt;sup>2</sup>Participants are not allowed to enroll in the same program for more than once.