

Kerala State Haj Committee
APPLICATION FOR HAJ TRAINER - 2017
(Use Capital Letters only)

1) Name of the Applicant : _____

2) Age & Date of Birth : _____

3) Educational Qualification: _____

4) Profession : _____

5) Have you performed Haj: Yes / No

If yes, in which year : _____



6) Whether worked as Trainer Earlier: Yes / No - If Yes, in which year: _____

7) Permanent Address: _____

District: _____

8) Contact No.: Land Tel. (With STD Code): _____

Mobile No.: _____ E-Mail: _____

9) Languages Known:-

	Language	Read	Write	Speak
1				
2				
3				

10) Preferred Place / Area for conducting Training: 1) _____ 2) _____

11) Experience in Haj Related Matters and Training:-

Date:

Signature of the Applicant
