

**Prayas Vyaktitva Vikas Seva (P) Ltd.**

Registered Office: H-19, Phase IV, Rapti Nagar, Gorakhpur 273013

Corporate Office: 513, Fifth Floor. Felix Square, Sushant Golf City Lucknow 226030

**Registration form for working as Activity Partner (Vyaktitva Vikas Margdarshak)**

Name:

Fathers' Name:

Permanent address (Complete with PIN Code)

Correspondence address (Complete with PIN Code)

Contacts (Phones): Mobile:

Email

Aadhar Card No:

PAN Card No:

Academic Qualification and experience (Minimum: Graduate)

Particulars of one time registration fee of Rs. 100 (One Hundred only): to be paid digitally through the payment link provided for this purpose. . Payment transaction details:

**Certificate**

I hereby certify that I have carefully read the entire information related to work profile; responsibilities, probable income and applicable terms & conditions for working as Activity Partner (Vyaktitva Vikas Margdarshak-VVM)) and I agree with them and I am ready to work as Activity Partner (Vyaktitva Vikas Margdarshak-VVM)) as a self-employed person out of my free will and without any coercion. Accordingly I have signed on these terms and conditions as token

of my consent. The paper containing them duly signed by me is attached with this application. I certify that I possess and will continue to possess smart mobile phone with internet connection. I hereby also give my consent for digital transfer of my share of income earned by me and would furnish bank details for that purpose as and when required.

Date

Signature

**For Office Use:**

The request for registration as Activity Partner (Vyaktitva Vikas Margdarshak) from Shri-----  
-----is accepted and code no. VVM/-----is allotted. This code number should  
be quoted in all future correspondences.

Signature

For 'Prayas Vyaktitva Vikas Seva (P) Ltd.'

Designation

Dated-----