<On Company's Letterhead>

Employer Registration Form

7th March, 2020 INDUSTRIAL TRAINEE Campus Interview Program

| Employer / Company Name: | |
|------------------------------------|---|
| Address for Communication : | |
| | |
| Tel No: | |
| E-mail address: | _ |
| Website: | |
| Contact Person Details | |
| Name : | |
| Designation : | - |
| Mobile No : | _ |
| E-mail ID : | |
| Detailed description of job duties | |
| | |
| | |
| | |

| Date : | Signature of competent authority |
|---|---|
| • | |
| We will be sending participation fess by post Dadar, Andheri, Mulund, Cuffe parade OR Online through website to WIRC account b email to wicasa@icai.in) before 1st March 2 | BKC / handed over on the day of event / y visiting www.wirc-icai.org (scan form by |
| You are requested to register our company PLACEMENT PROGRAM. | for INDUSTRIAL TRAINEE CAMPUS |
| Stipend offered: | |
| Place of posting: | |
| Hours per Week : | |
| Number of Vacancy : | |