

WORLD SKILL COUNCIL

ACCREDITATION APPLICATION

Name of the Chairman / Correspondent	
Name of the Institution	
Institution Address	
Mobile Number	
WhatsApp Number	
E-Mail Address	
Experience in the field of Education	
Name of the Courses with your Institution	
Details regarding professors If required, pls use additional sheets	
I hereby accept all the terms and conditions of World Skill Council	
	Chairman / Correspondent Signature

Note: The following documents to be enclosed with application

- Interior, Exterior and Special features of your Institution Video Each 5 Minutes
- Chairman / Correspondent Passport size Photo 2 Nos.
- Chairman / Correspondent Aadhaar Card (or) Passport Copy (or) Driving License Copy