



SINDH TECHNICAL EDUCATION & VOCATIONAL TRAINING AUTHORITY (STEVTA)

**TRADE TESTING BOARD**

GOVERNMENT OF SINDH

VTI Campus, Block-C, Al-Haidery, North Nazimabad, Karachi

E-mail: [secretary@sindhhtb.gov.pk](mailto:secretary@sindhhtb.gov.pk) Web site: [www.sindhhtb.gov.pk](http://www.sindhhtb.gov.pk)

PH# 021-99260233



**APPLICATION FORM**

**RENEWAL OF AFFILIATION**

# SECTION 'A'

**i.** Name of Institute / Centre: \_\_\_\_\_

**ii.** Postal Address: \_\_\_\_\_  
\_\_\_\_\_

**iii.** Expiry date of Affiliation Certificate issued by TTB Sindh: \_\_\_\_\_

**iv.** Apply for Renewal w.e.f.: \_\_\_\_\_

**v.** Registered with Authority STEVTA  Yes  No  In Process

**vi.** Period of Registration  02 Years  03 Years  05 Years

**vii.** Date of Registration with STEVTA: \_\_\_\_\_  
(If yes, please mention the date of Registration)

**viii.** Name of Course for Renewal.

Regular Courses  CBT Courses  BBSHRRDB  Endorsement  Other

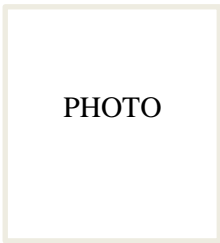
S. No	Course Title	Duration	Pre-requisite Qualification	Curriculum Available	Intake Capacity of Trainee

**ix.** Name of Course for New Induction.

Regular Courses  CBT Courses  BBSHRRDB  Endorsement  Other

S. No	Course Title	Duration	Pre-requisite Qualification	Details Curriculum Available	Intake Capacity of Trainee

# SECTION 'B'



PHOTO

## x. Applicant Profile Current

Name of applicant: \_\_\_\_\_

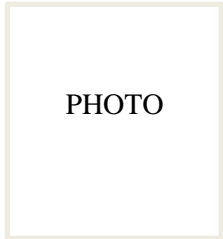
Address: \_\_\_\_\_

\_\_\_\_\_

CNIC #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Land Line #: \_\_\_\_\_ WhatsApp #: \_\_\_\_\_

E-mail: \_\_\_\_\_



PHOTO

## xi. Partner Profile Current (if Applicable)

Name of Partner: \_\_\_\_\_

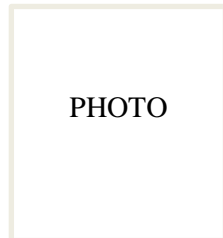
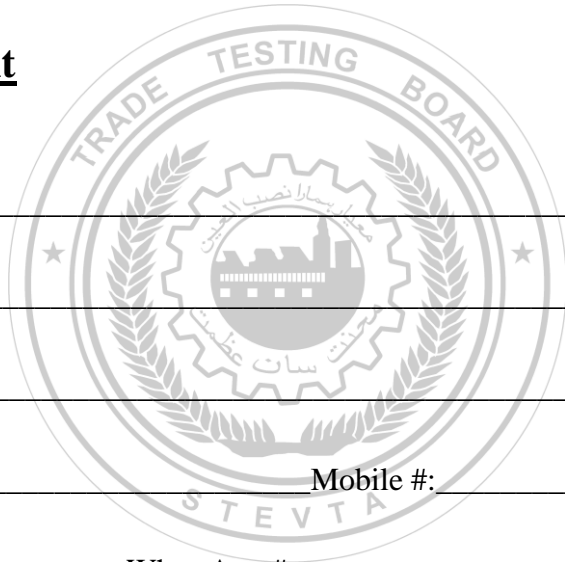
Address: \_\_\_\_\_

\_\_\_\_\_

CNIC #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Land Line #: \_\_\_\_\_ WhatsApp #: \_\_\_\_\_

E-mail: \_\_\_\_\_



PHOTO

## xii. Principal Profile Current

Name of Head of Institute / Principal: \_\_\_\_\_

Address: \_\_\_\_\_

CNIC #: \_\_\_\_\_ Qualification: \_\_\_\_\_

Cell #: \_\_\_\_\_ WhatsApp #: \_\_\_\_\_

Institute E-mail: \_\_\_\_\_ SIGNATURE OF PRINCIPAL: \_\_\_\_\_

# UNDERTAKING

I \_\_\_\_\_ Principal / Owner of

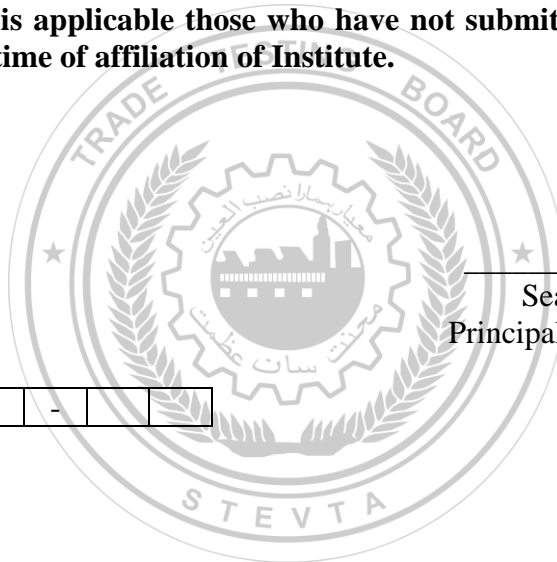
\_\_\_\_\_ Institute / Centre is submitting

undertaking that I shall provide the registration certificate issue by the STEVTA HQ, otherwise

Trade Testing Board Sindh, Karachi has the right to cancel affiliation of the Institute anytime without

any prior notice.

**NOTE: This undertaking is applicable those who have not submitted Registration Certificate issued by STEVTA at the time of affiliation of Institute.**



\_\_\_\_\_  
Seal & Signature of the  
Principal / Owner of the institution

Date			-			-		
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