Name of Block Name of Cluster Unique Code of RY generated By MIS *		Name of Job Resource Person : *					
Unique Code of RY generated By MIS *		Mobilization Date:					
	Unique Code of RY generated By MIS *						
SHG Details							
Is Candidate belong to SHG?*	Member/Family/No (Tick)	SHG District *					
SHG Name *		SHG Block *					
SHG Member Name *		SHG Cluster *					
No. of Adult women in the family *		SHG Panchayat *					
Reason for not Registering in SHG *	Jeevika Not working/Lack of time/ Lack of saving	SHG Village *					
Candidate's Pers	sonal Details	Candidate's Family and Category details					
First Name *		Father's Name *					
Last Name *		Mother's Name *					
Gender *	Male/Female	Head of the Family *					
Date Of Birth *		Monthly Family Income in Rs. *					
Type of Disablity *		No of Family Members *					
Disability %		Religion *	1				
Marital Status *	Single/Married//Widow/Divorce	Category *	SC / ST / OBC / MD / General				
Education Qualification *		Is Minority *	Yes / NO				
Technical Qualification *							
Summary of Certifications		Duration of Course					
Date of Certification		Certifying Agency					
Languages Known *		Candidate Identification Details					
		Candidate belongs to BPL?*	Yes / NO				
Candidates Bank Accounts Details		BPL Type *	POP / Poor				
Name of the Bank		BPL Card Number					
Bank Branch		Type of Photo Identity Proof *					
Account Number		Photo Indentity Proof Number *					
Contact Information		Type of Age Proof Identity *					
Address *		Age Proof Identity Number *					
Name of District *		Residence Proof *					
Name of Block *		Height in centimeters					
Name of Cluster *		Identification Marks					
Name of Panchayat *		Other Contact Number					
Name of Village *		E-Mail Address					
Mobile Number *		Aadhar / UID Number					
	Screening and Counselin	g Details					
Candidate Interested in *	Training / Employment / self Employment	Domain Eligible for					
Name of City candidate ready to relocate *		Date of Counseling					
Interest Inventory Score		Attendant came with candidate					
Counselor Remarks		Comments	1				
	Candidate Experience	Details					
Is Candidate having experience	Yes / NO	From Date					
Name of Organization		To Date					
Job Description		Last Salary Drawn per month					
Interested Trade Details							
Choice One Choice Two							
Sector	Trade	Sector	Trade				