

## APPRENTICES CONTRACT REGISTRATION CARD

[Under Section 4 of The Apprentices (amendment) Act, 1961]

(Must be submitted in triplicate within ten days from the date of joining along with a copy of final year / final semester mark sheet authenticated / verified by the employer with seal of employer)

In case, Apprentice has joined the establishment directly, please mention "DIRECT" in box. If not DIRECT, please mention BOAT(NR)'s forwarding letter number & date				Apprentice PID Number																	
<b>1. Type of Apprentice</b> a) Graduate Apprentice (GA) [Engg./Tech. Degree pass out] <input type="checkbox"/> b) Graduate Sandwich Apprentice (GSA) [Engg./Tech. Degree student] <input type="checkbox"/> c) Technician Apprentice (TA) [Engg./Tech. Diploma pass out] <input type="checkbox"/> d) Technician Sandwich Apprentice (TSA) [Engg./Tech. Diploma student] <input type="checkbox"/> e) Technician Vocational Apprentice (TVA) [10+2 Vocational pass out] <input type="checkbox"/>		<b>[To be filled by BOAT(NR)]</b> Registration No.: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Reg. Date: <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px;">D</td> <td style="border: 1px solid black; width: 20px;">D</td> <td style="border: 1px solid black; width: 20px;">M</td> <td style="border: 1px solid black; width: 20px;">M</td> <td style="border: 1px solid black; width: 20px;">Y</td> </tr> </table> Registered Under Section 4 of The Apprentices Act.		D	D	M	M	Y	Y	Y	Y	<p style="color: red; font-weight: bold;">Important</p> Affix firmly a recent passport size photograph and put employer's signature and organization's seal so that they appear partly on photograph & ACRC <div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p style="color: red; font-weight: bold;">Do not pin or staple</p> </div>									
D	D	M	M	Y	Y	Y	Y														
<b>2. Gender</b> Male <input type="checkbox"/> Female <input type="checkbox"/>		<b>REGIONAL / DEPUTY / ASSISTANT CENTRAL APPRENTICESHIP ADVISER</b> <b>BOARD OF APPRENTICESHIP TRAINING (N.R.)</b>																			
<b>3. Date of Birth</b> <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px;">D</td> <td style="border: 1px solid black; width: 20px;">D</td> <td style="border: 1px solid black; width: 20px;">M</td> <td style="border: 1px solid black; width: 20px;">M</td> <td style="border: 1px solid black; width: 20px;">Y</td> </tr> </table>				D	D	M	M	Y	Y	Y	Y										
D	D	M	M	Y	Y	Y	Y														
<b>4. Name of the Apprentice</b> (in capital letters as in mark sheet) (First Name) (Middle Name) (Last Name)			<b>5. (a) Father's Name</b> <b>5. (b) Mother's Name</b> (First Name) (Middle Name) (Last Name)																		
<b>6. Address</b>	<b>6. (a) Permanent Address</b>	<b>6. (b) Present Address</b>		<b>6. (c) Telephone Number:</b>																	
House/Plot No.				<b>6. (d) Mobile Number:</b>																	
Street																					
Village																					
Block/Tehsil																					
District																					
Pin Code																					
<b>7. Whether belongs to:</b> please specify [ ✓ ] General <input type="checkbox"/> Schedule Caste <input type="checkbox"/> Schedule Tribe <input type="checkbox"/> Other Backward Class <input type="checkbox"/> Physically Handicapped <input type="checkbox"/> Minority Community: Muslim <input type="checkbox"/> Jain <input type="checkbox"/> Parsi <input type="checkbox"/> Christian <input type="checkbox"/> Sikh <input type="checkbox"/> Other <input type="checkbox"/>																					
<b>8. Educational Qualification</b>																					
Degree / Diploma / 10+2 (Voc)	Name of the University / Board	Name of the Institution, City & State	Discipline / Branch	Month & Year of Passing	University/ Board Enrollment No. / Roll No.	% of Marks or CGPA	10 <sup>th</sup> & 12 <sup>th</sup> / Diploma Registration No. / Roll No.														
<b>9. Period of training:</b> Commencement date*      End date <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px;">D</td><td style="border: 1px solid black; width: 20px;">D</td><td style="border: 1px solid black; width: 20px;">M</td><td style="border: 1px solid black; width: 20px;">M</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td> <td style="border: 1px solid black; width: 20px;">D</td><td style="border: 1px solid black; width: 20px;">D</td><td style="border: 1px solid black; width: 20px;">M</td><td style="border: 1px solid black; width: 20px;">M</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td><td style="border: 1px solid black; width: 20px;">Y</td> </tr> </table>				D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	<b>10. Rate of Stipend</b> (in Rs. per month)	
D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y						
*Note: Date of commencement of training must be after date of declaration of result																					
<b>11. Name &amp; Address of the Employer</b>     Pin Code : Phone No : Fax No : E-mail id :				<b>12. Name &amp; Address of the Surety</b>     Pin Code : Phone No : Fax No : E-mail id :																	

**Note:** 1. This Contract Registration Card must be submitted with both pages appearing **back to back** and not on separate sheets.  
 2. This Contract Registration Card is liable for rejection in case any information in any clause is not furnished / partly furnished.

We, the Employer, Apprentice (the Guardian in the case of a Minor Apprentice), and the Surety hereby declare that we have read the contents of this Apprenticeship Contract as per The Apprenticeship Rules, 1992, as amended from time to time, and agree to abide by all the provisions made there under. We also declare that all the provisions of The Apprentices Act, 1961, as amended from time to time including those relating to Payment of Stipend, Registration of Contract, Claim for reimbursement of Government Share of 50% limited to Government minimum rates prescribed from time to time, and Termination of Contract, etc. are binding on us. We also understand that training under The Apprentices Act "do not guarantee a job with the employer / BOAT after the training is completed".

1. In the event of termination of Contract through failure on the part of the Employer to carry out the terms and conditions of the contract, he/ she shall pay to the Apprentice such compensation as may be provided by the Central Govt.
2. In the event of termination of Contract through failure on the part of the Apprentice to carry out terms of the contract, the Surety at the request of the Apprentice hereby guarantees to the Employer and the Central Government the payment of such amount as may be determined by the Central Apprenticeship Adviser, towards the cost for training of the Apprentice.
3. The liability of the Surety shall not at any time exceed an amount equal to Rs.2500 with interest at 12% per annum.

**Note: The stipend shall be compulsorily paid by the Employer to the Apprentices for a particular month by the 10<sup>th</sup> day of the following month.**

Signature of Employer, and  
Seal of Establishment

Signature of Apprentice  
or Guardian (in case of a minor Apprentice)

Signature of Surety

Witness: 1.....

Witness: 1.....

Witness: 1.....

(Name \_\_\_\_\_)

(Name \_\_\_\_\_)

(Name \_\_\_\_\_)

2.....

2.....

2.....

(Name \_\_\_\_\_)

(Name \_\_\_\_\_)

(Name \_\_\_\_\_)

### SELF DECLARATION

(To be obtained from the candidate before joining as an Apprentice)

I \_\_\_\_\_ son / daughter of \_\_\_\_\_  
aged \_\_\_\_\_ residing at \_\_\_\_\_

\_\_\_\_\_ hereby solemnly affirm and state as under:

1. That I passed my Degree / Diploma / 10+2 Vocational Higher Secondary Certificate examination in (Subject) \_\_\_\_\_ from \_\_\_\_\_ Polytechnic / College / School at (Place) \_\_\_\_\_. The date of declaration of my Final year result is \_\_\_\_\_
2. That after passing the above said examination
  - a. I did not have training or job experience for one year or more.
  - b. I did not undergo apprenticeship training at any place under The Apprentices Act.

What is stated above is true to the best of my knowledge and belief, and nothing has been concealed therein. I am well aware of the fact that if the information given by me is proved false/not true, I will have to face the punishment as per the law. Also, all the benefits availed by me shall be summarily withdrawn.

Date:

Place:

SIGNATURE

### CHECK LIST FOR EMPLOYERS

- |  |   |
|--|---|
| <input type="checkbox"/> Apprentices Contract Registration Card (ACRC) is in a proforma as prescribed by BOAT (NR), Kanpur.  | <input type="checkbox"/> 'Self-Declaration' is duly furnished and signed by the Apprentice.   |
| <input type="checkbox"/> Photograph of the Apprentice bears signature of employer with seal of establishment, both partly appearing on the Contract Registration Card as well. | <input type="checkbox"/> The photocopy of mark sheet of Final Year / VIII <sup>th</sup> Semester of Engineering Degree / VI <sup>th</sup> Semester of Diploma / 12 <sup>th</sup> Vocational authenticated by the officer of the establishment by signing and affixing seal is enclosed. (Copy of marksheet downloaded from internet is not acceptable). |
| <input type="checkbox"/> All columns /details required in ACRC form are duly filled in.  | <input type="checkbox"/> The Apprentice has passed all the semesters / exams of the Engineering Degree / Diploma Course / Vocational course.  |
| <input type="checkbox"/> Employer's 'Seal' is affixed on the Contract Registration Card.   | <input type="checkbox"/> ACRC is signed by the Employer, Apprentice, Surety and the Witnesses.  |