"District Rekiya Kendraya" Monthly Progress Report
Training Refferal Details (Individual Officer)

District :

Month : **20.....**

DME- 35B

1	Total Training Opportunity Registration	
2	Total Training Matchings	
3	Total Training Refferals	

Name of the Officer :

No	Name of the Job Seeker	Address	M/F	Contact No	Name of the Training Institute	Refferd Training / Course	Training Institute Contacts

I declare all the informations provided above are true and correct

Date .....

.....

Officer Signature

Official stamp