

**INSPECTION/WORK REPORT FOR SKILLED WORKER CERTIFICATE**

<b>Inspection Report Number (System Generated Unique Identification No.):</b>	
Name and address of the Dealer	Contact No:- E-mail Id:-
Date of Inspection:-	Date of Submission of Application:

**Documents:**

S.No	Particulars	Remarks
1.	Address Proof of the applicant that he shall be the resident of Andhra Pradesh	
2.	Proof of Date of Birth	
3.	Aadhar Card of the applicant	
4.	Copy of Educational Qualification Certificate	
5.	Genuineness/Veracity of the educational qualification certificate obtained from the competent authority	
6.	Undertaking from the applicant for issuance of skilled worker certificate, in the following performa	

Signature of the Inspecting Officer

**Comments**

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