

TRAINEE APPLICATION LETTER (FORMAT)



(Trainee name & address here)

Date:

To,

Design Code Pvt. Ltd.
B-3, 1st Floor, Manikya Flats,
Swastik Society - 2,
Navrangpura
Ahmedabad - 380 009

Dear Sir,

I, a student of _____

(Program/semester/year) pursuing my architectural education at _____

_____ *(Institute/City)* wish to join DCPL as a
trainee from _____ *(month/year)* to _____ *(month/year)* .

Kindly find enclosed the following: *(Please Tick only)*

- DCPL Trainee Application Form
- Curriculum Vitae *(if desired/optional)*
- Copies of marksheets and certificates with mention of Rank in Class
- Statement of Purpose
- Portfolio *(if desired/optional)*

Thanking you,

Yours Sincerely,

DCPL – TRAINEE APPLICATION FORM

Please complete, in block letters, the sections that apply to you.

Return the form by e-mail to training@deesigncode.com

1. PERSONAL INFORMATION

Name (*underline Surname*) : _____

Date of Birth : _____

Place and Country of Birth : _____

Gender (M/ F) : _____

Present Citizenship : _____

Permanent Address : _____

Present Mailing Address : _____

Telephone (*also Mobile*) : _____

E-mail : _____

2. TRAINEESHIP PERIOD

Number of Weeks : _____

Semester : _____

Period (from – to) : _____

3. INSTITUTE OF STUDY (ARCHITECTURE)

Name : _____

Address : _____

Telephone : _____

E-mail : _____

Head of Department/Contact Person: _____

(Name, Designation, Telephone, E-mail): _____

: _____

: _____

4. CURRICULUM VITAE

Please attach concise (max 2 pages) curriculum vitae if you wish and fill the following

Educational Background:

Course	Year	% of Marks /Grade	Name of School/College/ University	Place and State
Professional Degree/Diploma	5 th year			
	4 th year			
	3 rd year			
	2 nd year			
	1 st year			
HSC / Equivalent				
SSC / Equivalent				
Others(Specify)				

Please attach copies of mark sheets/ certificates which mention rank in class

Scholarships / Awards / Achievements:

1. _____
2. _____
3. _____
4. _____

Current Studies / Thesis Topic:

Work Experience: *if any*

Dates of Employment		Organization's Name	Location and Contact No.	Nature of work
from	to			

Hobbies/Extra Curricular Activities/Social Work:

1. _____
2. _____
3. _____
4. _____
5. _____

Language Proficiency: *(Please Tick Appropriate Box)*

Language	English	Hindi	Gujarati	Others
Speak				
Read				
Write				

Computer Proficiency: *(Please Tick Appropriate Box)*

Course	MS Office	Auto CAD	Sketch-up	Others
Excellent				
Good				
Fair				

Family Details:

Relation	Name	Age	Education	Occupation
Father				
Mother				
Brothers/ Sisters				

5. STATEMENT OF PURPOSE:

Please describe why you want to undergo training at HCPDPM, what you hope to learn from it, and how it will fit in your plan. Maximum word limit is 200 words. (Use separate sheet)

6. REFERENCES: *(Senior Architect/teacher who knows you well but is not related)*

1. Name : _____

2. Address : _____

: _____

: _____

Telephone: _____

E-mail : _____

3. Name : _____

4. Address : _____

: _____

: _____

Telephone: _____

E-mail : _____

7. CANDIDATE'S STATEMENT

I certify that the statements made by me are true and complete. I also declare that, to the best of my knowledge, my health allows me to undertake the proposed traineeship.

Signature:
