



**FORM - 15**  
**KNOW YOUR TRAINER – UP-SKILLING/RE-SKILLING**  
**(KYT-U/R)**



**RESOURCE SUPPORT AGENCY**

**Scheme for Capacity Building in Textiles Sector - समर्थ (Samarth)**  
**of Ministry of Textiles, Government of India**

(To be filled in capital letters only)

|  |   |   |   |   |
|--|---|---|---|---|
| PREFERRED RSA UP-SKILLING/RE-SKILLING JOB ROLE/COURSE TO BE OPTED FOR TRAINING WITH COURSE CODE<br>(please write one course at a time) |   |   |   | Please Attach recent pass port size Photo and sign across it. |
| NAME OF TRAINER  |   |   |   |   |
| ADDRESS OF TRAINER   |   |   |   |   |
| TRAINER MOBILE NUMBER AND MAIL-ID  |   |   |   |   |
| TRAINER QUALIFICATION<br>(Please attach attested copy of proof of qualifications)  |   |   |   |   |
| RELEVANT EXPERIENCE (In Years)<br>(Please attach valid proof)  |   |   |   |   |
| PROPOSED STATES FOR TRAINING   |   |   |   |   |
| WHETHER APPROVED BY ANY TEXTILE RELATED SSC? YES/NO, IF YES, SPECIFY JOB ROLE (Please attach valid proof)                              |   |   |   |   |
| AMOUNT PAID, TRANSACTION NO. & TRANSACTION DATE  |   |   |   |   |
| AADHAAR No.  |   |   |   |   |
| PAN CARD No.   |   |   |   |   |
| TRAINER SPECIMEN SIGNATURE   | 1 | 2 | 3 |   |
| NAME OF IMPLEMENTING PARTNER   |   |   |   |   |
| NAME & SIGNATURE OF AUTHORIZED SIGNATORY WITH OFFICE SEAL/STAMP  |   |   |   |   |
| <b>FOR RSA USE ONLY</b>  |   |   |   |   |
| VERIFIED BY  |   |   |   |   |
| APPROVED BY  |   |   |   |   |
| ALLOTTED CODE OF TRAINER (UID)   |   |   |   |   |

\*Attach relevant documents proofs of eligibility criteria viz. education proofs, experience proofs, ToT proofs (if applicable), Aadhar card photocopy, PAN card Photocopy etc.