

**CHRIS (Computerised Human Resource Information System) &
TMIS (Training Management & Information System)
Details of Trainee**

Sr. No.	Particulars	Value (Please filled in CAPITAL LETTERS only) All fields are mandatory
1	Designation Type (Doctor/ Paramedical)	
2	Govt. Employee ID	
3	District / Zone (Ajmer/ Ajmer)	
4	Work station Type (CHC/ PHC/ APHC/ DH/ SDH/ SAT./ CMHO/BCMO)	
5	Location (Name of Health Institute)	
6	Location Type (TSP/ Non TSP)	
7	Full Name	
8	Designation	
9	Physically handicapped (Yes/ No)	
10	Gender (M/ F/ O)	
11	Category (Gen./ ST/ SC/ Other)	
12	*Mobile Number (Mandatory)	
13	*E-mail ID (Mandatory)	
14	Date Of Joining (DD/MM/YYYY)	
15	Date Of Birth (DD/MM/YYYY)	

Note: All fields are mandatory and fill in CAPITAL/ BLOCK LETTERS only. Please carry this form and submit at the training institute. Download mobile application for CHRIS from Google Play Store. For help contact to DNO-NHM at District CM&HO Office.

**Signature of Trainee
Date:**