- **Placement Organization's Registration on the NCS Portal (www.ncs.gov.in)**

A. **Basic details of the organization:**

1. Organization is registered with **Government/ISF/LIN/MOIA/Others**   (plz **V** the appropriate)

2. Registration Number :_____

3. Name of the Organization: _____

4. Former Registered Name, if any _____

5. Type of organization: _____ _____   (Private)

6. Sector(s): _____

7. Registered Office address: _____

   City/ Village:_____

   Sub-District/Taluka/Tehsil:_____

   District:_____State:_____

   PIN code:_____ Mobile no.:_____

8. Organization's email: _____

9. Organization's URL/Website, if available : _____

10. Organization's PAN:_____

11. Year of Incorporation :_____

12. Area of Operations :_____ (District/State)

13. Mention if **PROPRIETORY** :_____ (Yes/No)

   B. **contact details of the Contact person (Head/ Owner)**

14. Unique Identification Id of the Owner/ Head: **Aadhar/PAN**   (plz **V** the appropriate)

15. Unique Identification ID number: _____

16. Person's Name(as per UID): _____

17. Father's /Guardian's Name :_____

18. Date of Birth : _____(DD-MM-YYYY)

19. Gender :_____(Male/Female)

20. Mobile Number:_____

21. Email address:_____

22. Contact person's Designation :_____

23. Choose your USER ID:_____ _____(to be checked with the NCS portal)

24. Choose your Password: _____(Min. 8 character, alpha-numeric)

25. NCS ID (as generated)_____