



KNOW YOUR ASSESSOR (KYA) FORM



NAME OF THE ASSESSOR				Please Attach a pass port size Photo
ADDRESS OF ASSESSOR				
ASSESSOR MOBILE NO				
ASSESSOR E-MAIL				
ASSESSOR QUALIFICATION (Please attach attested copy of proof of qualification)				
AADHAAR No.				
PAN CARD No.				
ASSESSOR SPECIMEN SIGNATURE	1	2	3	
UNDERTAKING BY ASSESSMENT AGENCY	We undertake that Sh/Smt _____ is not involved in any of the training activities as trainer with any of IA and as assessor with other Assessment Agency under ISDS			
To Be Filled By TAG				
NAME OF ASSESSMENT AGENCY				
NAME & SIGNATURE OF AUTHORIZED SIGNATORY WITH OFFICE SEAL/STAMP				
VERIFIED BY				
APPROVED BY				
ALLOTTED CODE OF THE ASSESSOR				

