**Registration Form**

**GUJARAT INSTITUTE OF DEVLOPMENT RESEARCH**

**AHMEDABAD**

|  |  |  |
| --- | --- | --- |
| 1. | Name of the Applicant |  |
| 2. | Name and complete address of the college/department/university /institute  |  |
| Telephone  |
| Email |
| Website |
| 3. | Sex  | M/F |
| 4. | Category *(Tick the relevant category)* | General / SC /ST / OBC / PH) ------------------*(Attested Copy of the category/community certificate to be attached)* |
| 5. | Educational Qualification and Discipline   |  |
| 6. | Email ID  |  |
| 7. | Telephone No: Landline Mobile Number |  |
| 8. | Have you attended any ICSSR supported training courses/ workshops previously?  |  Yes No  |
| 9 | If yes, give details  |  |

**Declaration**

1. I hereby declare that the information and record(s) submitted are true and correct to the best of my knowledge and belief.

2. I hereby agree that my application may be summarily rejected in case any of the information/record(s) furnished are found to be incorrect or false and I will not make any correspondence in the matter whatsoever and will abide by the decision of the Institute in rejecting my application.

**Signature of the candidate:**

**Date:**

**Name of the Candidate:**