

Faculty Development Programme - Date: September 26-30, 2024
5 Days Research Proposal Writing Course

Application Form

Name: _____
(in CAPITAL Letters)

Gender: _____ Social Category: SC []; ST []; OBC []; GEN []

Age (Years) Category*: < 25 []; 26-30 []; 31-35 []; 36-40 [];
40-45 []; 45-50 []; 50-55 []; 56 > []

Institute/ University/ College/ Other: _____

Qualification: _____ Discipline: _____

No. of Research Projects (Ongoing/ Completed) as Principal Investigator: []

Address for Correspondence: _____

Mobile No: _____ Email ID: _____

Accommodation Required: Yes []; No []

Note: Attach a statement of purpose not exceeding 300 words along with this application. It is important for the selection of the candidates for the course.

Date:

Signature of the Applicant

**Mark where appropriate; Photocopy of this form can be used.*

RECOMMENDATION

Certified that the information given by the applicant is true and the applicant will be relieved in time to participate in the above FDP programme, if selected.

Name:

Date:

Signature
Dean/ Head of the Department
Principal/ Registrar of the College/
Institution/ University
(Office Seal)

