



**APPLICATION FORMAT**

Item / Sl. No. \_\_\_\_\_ Name of the Event Organizer \_\_\_\_\_

APPLICATION FOR THE EVENT NAME (WORKSHOP/INTERNSHIP): -----

1. Name of the Candidate :  
: (In capital letters)
2. Father's /Husband's name ::
3. Sex :: Male / Female
4. Date of Birth ::  
(Documentary evidence to be attached)
5. Age as on Closing date of Advertisement ::
6. Marital Status ::
7. Correspondence Address with:  
(Contact No. & email address)
8. Permanent Address ::
9. Nationality ::
10. Educational Qualifications ::

AFFIX  
RECENT  
PASSPORT  
SIZE  
PHOTOGRAPH

Name of the Exam.	Name of Board/ University	Class/ Division	Percentage	Year of passing	Subjects taken
1	2	3	4	5	6

11. Whether NET Qualified (Attested certificate- if YES) :: Yes / NO
12. Whether Pursuing PG/PhD (Which University, Application should be forwarded from your university authority) ::
13. Research program (Thesis title):
14. Any specific Expectations from the event:

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15. List of Publications (in referred journals only; attach only first page of the publication):

- a. NAAS rating above 6.00
  - A. As a first author
  
  - B. As a subsequent author
  
- b. NAAS rating below 6.00
  - A. As a first author
  
  - B. As a subsequent author

I hereby declare that all the statements made above are true, complete and correct to the best of my knowledge and belief. I also declare the In the event of any information being found false/incorrect/ineligibility being detected at any time before or after the Examination/Interview, action may be taken against me and I shall be bound by the decision of the employer. I further declare that I have read the Advt. Carefully and I declare that I fulfil all the conditions of eligibility regarding age limit, educational qualifications etc., prescribed for the post.

**Place:**

**Signature of the candidate**

**Date:**

\*Application not signed by the candidate /not forwarded by university head/dean/advisor will be rejected.

**NO OBJECTION CERTIFICATE (For those who are working in the IIHR- KVK & Farm, Hirahalli only)**

This is to certify that, Mr/Ms/Mrs/Dr-----  
-----is presently pursuing my PG/ PhD program in the discipline of -----  
----- at----- (University/ College Address) under the-----  
----- (Advisor/Supervisor Name, Designation/address) at this College/Institute/University. I have ‘No  
Objection’ for forwarding the application for the event applied by him / her.

Signature :

Name of the Advisor

Dean/Head/Registrar

**Date:**

**Place:**