

APPLICATION FOR THE INTERNSHIP PROGRAMME  
DEPARTMENT OF DISINVESTMENT AND PUBLIC ASSEST MANAGEMENT

Name & full Address of the sponsoring institution

Phone number of sponsoring institution.

**BIO-DATA**

Full Name (Mrs/Ms/Mr)  
(Surname first)

Date of Birth:

Age:

Full Postal Address for Communication including e-mail address:

Telephone No.

Residence

Mobile

Educational Qualifications:

Exam	University/Institute	Year of Passing	% of Marks	Subject (Arts/Commerce/Science/ Tech etc)

Additional Qualifications (CA/CWA/Computers etc):

Subjects of Specialization/interest:

Extra Curricular Activities:

Project Undertaken:

Project Preference. (Please note that it may not always be possible to allocate):

(For Research Student Only)

Brief Description of the subject/purpose of the current research:

I certify that above information furnished by me is true to the best of my knowledge and belief,

Place:

Signature:

Date:

Name:

**Authentication of particulars furnished above by the Institute/University**

This is to certify that the information furnished by Mrs./Ms./Mr..... in the form of application above is correct to the best of our knowledge.

Recommendations, if any

(Signature & Seal of Authorized Official)

