

Prescribed Application Form - Foreign Students

**Latest
Passport size
Photograph
of student**

1. BIO-DATA

Full name :
Last name Middle name First name

Date of Birth:
DD MM YY

Gender: Please check the box: M F

Nationality:

Full postal address (with ZIP/PIN Code):

E-mail address:
Telephone Nos:

Name of the Institute/University:

Full postal address(with ZIP/PIN Code):

E-mail:
Fax No.:
Telephone No:

Name of the course being pursued:

Description of the course in brief:

Educational Qualifications:

Degree obtained Subjects	Name of the Institute/University	Grade % of marks	Year of passing

Work experience, if any:

Topic of interest preferred for internship:

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

Place:

Signature :

Date:

Name of the student:

2. Authentication of particulars furnished in (1) above by the Institute/University

This is to certify that the information furnished by Mr./Ms./Mrs.-----
----- in the prescribed Application Form at (1) above is correct to the best of our knowledge.

Recommendations, if any

**Signature & Seal of
Authorised Official**