

National Institute of Science Communication and Information Resources (NISCAIR)
Application Form for Participation in Short Term Course

Course Title.....

The Chosen Batch with dates

1. Name of the Applicant (in full, in BLOCK letters)

Mr./Dr./Mrs./Ms.....

2. Address:

..... PIN Code.....

Telephone Nos.

Fax No..... E-Mail Address

3 Date of Birth

4. Qualifications (Starting from Graduation)

Degree	University	Year
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(1) Academic

(2) Professional

(3) Computer Courses attended

5. Sponsoring Organisation, if any,

Organisation Address.....

6. Details of Present Post

Designation Period of Service.....

7. Whether Accommodation facility needed Yes/No

8. Course Fee payment details

D.D.No.....Date.....Amount.....

(DD should be drawn in favour of **Director, NISCAIR** payable at New Delhi)

Place :

Date:

Signature

Candidate's

Mail to :

In-Charge

Training Division

National Institute of Science Communication and Information Resources (NISCAIR)

14, Satsang Vihar Marg

New Delhi - 110 067