UGC –Human Resource Development Centre

Jawaharlal Nehru University
JNU New Campus New Delhi 110067
Ph: 011-26742532, 26742566

Application Form Workshop (2018-2019)

Workshop Nam	ne:	((Specify Course Name)		
Name (Block Lo	etter) Dr/Mr./Ms		_		
			_ Photo	ograph	
Date of Birth	D M	Y]		
Category	SC ST OBC General				
	Male Fer	nale			
	Visually Challenged Phy	sically Challenged			
Institutional/Colleg	ge/University Address	Mailing Address:			
State		State			
PIN Telephone (STD code)		PIN			
Totaphone (812 com			ode)		
FAX					
Website URL					
ademic Career:					
Examination	Subject (s) & Specialization	% of Marks/Grade	University	Year	
Post-Graduation					
M. Phil.					
Ph. D.					

Contd.

Details of Employment (in chronological order):

	Institution	Designation	Period		Nature of Duties		
			From	То			
C	1	1.44	•				
Su	bjects of your specia	l interests:					
De	tails of Publications*	÷					
PROCESSING FEE							
P	lease attach to this fo	rm a non-refun	idable proce	essing fee of F	Ss. 500/- through an account		
Please attach to this form a non-refundable processing fee of Rs. 500/- through an account payee bank draft in favour of the Finance Officer , Jawaharlal Nehru University , New							
Delhi , payable at the State Bank of India, JNU, and Code No. 10441. On the reverse side of the draft please write the name of the course applied for, your own name and your							
address. We regret that cash/cheques/ P.O. etc. are not acceptable.							
DRAFT NO.:DATE:							
ISSUING BANK & BRANCH:							
AMOUNT (In words):							

^{*} If you require more space, please attach a separate sheet and mention it.

Contd.

Certificate from College/University

Certified that Dr/Mr./Ms		<u>h</u> as			
been working in this College/University as	since	We			
shall be happy to sponsor him/her if selected for the					
Human Resource Development Centre, Jawaharlal Nehru University, New Delhi-110067.					
Tuman Resource Development Centile, jawanariai Nemi u omversity, New Demi-110007.					
*Also certified that this College is included in the list of Colleges under Section 2(f) & 12-b of the UGC Act.					
	Signature of Authorised P	erson			
	Date:	010011			
Name					
Designation					
Address					
	Office Seal				
PLEASE NOTE:					
LEASE NOTE.					

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- 1. The last date for receipt of an application form is 45 days before the start of the course.
- 2. This application is valid for ongoing academic year 2018-2019 only.
- 3. The application will be processed only when accompanied with the processing fee (photocopies of the draft are not accepted).
- 4. Selected applicants will be intimated by E-mail/Letter after screening.
- 5. Please bring a relieving order from the appropriate authority at the time of joining the course. No one shall be allowed to sit in the course without a relieving order.
- No TA will be paid to participants attending short term courses/workshops.
- * Teachers working in universities and colleges that are included under Section 2(f) of the UGC Act, even though they may not yet be fit to be included under Section 12 (B), may be invited to participate in the Orientation Programmes and Refresher Programmes. The teachers of colleges that do not yet come within the purview of Section 12(B), but have been affiliated to a university for at least two years, will be permitted to participate in the programmes/courses. However, they won't be paid TA/DA and other allowances for attending these courses.

I hereby declare that the entries made in this application form a knowledge and belief.	are true to the best of my
	Signature of Applicant Dated: