

INTERNSHIP PROGRAMME APPLICATION FORM

- i. Name :
- ii. Nationality :
- iii. Present address :
- iv. Permanent address :
- v. Telephone :
- vi. Mobile(if any) :
- vii. E-mail :
- viii. Educational qualifications :
- ix. Additional qualifications (if any) ;
- x. Present university/institute/organization (if applicable) ;
- xi. Degree expected if tied to a university or institute :
- xii. Dates of internship : From To
- xiii. Which area you prefer to do the internship in? :
- xiv. If you have been an intern in any other organization before, please state the area/project you worked on :
- xv. Why do you want to do Internship with CFAR?
- xvi. How can your skills, knowledge and personal attributes help our organisation?
- xvii. How will you be benefited doing internship in CFAR?

All of the information on this form is true and complete to the best of my knowledge. I understand that any false statements made by me on this application or any supplement thereto may by grounds for rejection of my application or dismissal from any subsequent internship assignment.

Signature:

Name:

Place:

Date:

AUTHORISATION FROM THE PARENT INSTITUTE/ORGANISATION

Name of the college/university/ institution/professional association:

Address:.....

I (name of supervisor/authorized representative)..... hereby certify that Mr/Ms..... is presently a graduate/post graduate student /associate of (college/university/institution/professional association).....

We have no objection to Mr/Ms (name of student seeking internship).....pursuing internship at Centre for Advocacy and Research as part of his /her curriculum /interest.

Signature with seal:.....

Designation:.....

Place:.....

Date:.....