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Affix

attested

## NATIONAL EDUCATION SOCIETY FOR TRIBAL STUDENTS

## Format for Application for Internship

1. Name in full (in Block letters):

| 2. | Father's/Husband's Name:  |                    |                                 |         | recent        | t passport                   |   |  |
|----|---|--------------------|---------------------------------|---------|---------------|------------------------------|---|--|
| 3. | Permanent Address:  |                    |                                 |         | size<br>here. | photograph                   |   |  |
|    | Mobile No.:   |                    |                                 |         |               |                              | I |  |
|    | Email address:  |                    |                                 |         |               |                              |   |  |
| 4. | Address for correspondence:   |                    |                                 |         |               |                              |   |  |
| 5. | (a) Date of Birth:  | Date               | : Month:                        | Y       | ear :         |                              |   |  |
|    | (Attested copy of proof of a  | ge to be att       | ached)                          |         |               |                              |   |  |
|    | (b) Age as on:  | Years              | Months                          | Days    |               |                              |   |  |
| 6. | Whether SC/ST/OBC/GEN:  |                    |                                 |         |               |                              |   |  |
|    | (If SC/ST/OBC, documentary pr   | oof to be fu       | ırnished)                       |         |               |                              |   |  |
| 7. | Nationality :   |                    |                                 |         |               |                              |   |  |
| 8. | (a) Educational Qualifications in chronological order beginning from SSC(10 <sup>th</sup> Onwards): |                    |                                 |         |               |                              |   |  |
|    | Name of the Examination<br>Passed   | Year of<br>Passing | Name of the<br>Board/University | Sub stu | died          | Divisior<br>marks<br>obtaine |   |  |
|    |   |                    |                                 |         |               |                              |   |  |
|    |   |                    |                                 |         |               |                              |   |  |
|    |   |                    |                                 |         |               |                              |   |  |

(b) Professional/Technical Qualifications (If any):

| Name of the<br>Examination Passed | Year of<br>Passing | Details of<br>Course | Board / University | Subject<br>Studied | Division/% of<br>marks<br>obtained |
|-----------------------------------|--------------------|----------------------|--------------------|--------------------|------------------------------------|
|                                   |                    |                      |                    |                    |                                    |
|                                   |                    |                      |                    |                    |                                    |

| 9  | Work Experience | (if anv   | in chronolo | ogical order  | starting wi   | th the first i | ioh: |
|----|-----------------|-----------|-------------|---------------|---------------|----------------|------|
| J. | WOLK EXPELIENCE | (II ally) |             | igicai bi uei | , Starting Wi | ui uie iiist   | IUU. |

| Name & address of<br>Employer | Period of | service<br>To | Designation of post & scale of pay | Total length of service | Nature of work & level of responsibilities |
|-------------------------------|-----------|---------------|------------------------------------|-------------------------|--|
|                               |           |               |                                    |                         |  |
|                               |           |               |                                    |                         |  |

| .0.      | Any other information re  | elevant:    |                   |                         |                |   |
|----------|---|-------------|-------------------|-------------------------|----------------|---|
| L1.<br>_ | A brief write-up about yo   | our interes | t in NESTS        | internship programme: ( | Max. 300 words | ) |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |
|          |   | <u>D</u>    | <u>eclaration</u> | & Certificate           |                |   |
|          | hereby declare and certify that all the statements made in this application are true and correct to the<br>sest of my knowledge and belief. |             |                   |                         |                |   |
|          |   |             |                   |                         |                |   |

| Place | Signature of the Candidate |
|-------|----------------------------|
| Date  | Name                       |