

*Short-term Visiting Students Programme - (SVSP) (1)

*Long-Term Visiting Students Programme (LVSP) (✓)

1. <u>Applicant Details:</u>	
a. Name of the Student:	Mr./Ms
b. Gender:(Tick $\sqrt{appropriately}$)	Male / Female / Others
c. Category:(Tick $\sqrt{appropriately}$)	GEN / SC/ ST/ OBC(NCL)/EWS/PwD
d. Date of Birth (DD/MM/YY):	
e. E-mail:	
f. Mobile No.:	
g. Name of the College/Institution:	
h. Address of the College/Institution:	
i. University Affiliated:	
2. Address for correspondence:	
 3. Education Details: a. 10th Std.: School Name: Year of Passing: Aggregate %/Grade: b. 12th Std: School / College Name: Year of Passing: Aggregate%/Grade: 	
c. Present Programme of study:	
College Name:	
Programme:	
Duration:	

Year of Joining:		
Present year of study:		
4. Academic Achievements: (awards, medals, etc. if any)		
5. Name of the JNCASR Faculty member		
with whom you wish to carry out project work:	Dr./Prof	
	Unit/Dept.:	
6. Area (s) of Interest:		
7. Description of the proposed Project Work:		
	-	
8. Duration of the proposed Project Work:	From: to	
	1	
8. Duration of the proposed Project Work:	From: to	

***Note:** Short-term is for about a week and long-term is for more than a week and up to one semester.

	Signature of the Applicant:
Submitted through:	Date:

Signature of the Principal/HOD: _____

Name: _____

Seal:
