



**Application for Carrying out Project Work Under**

**\*Graduate Research Internship Programme - (GRIP) (✓)**

Please affix your  
passport-size  
photo here

<b>1. Applicant Details:</b>  a. Name of the Student:  b. Gender:(Tick ✓ appropriately)  c. Category:(Tick ✓ appropriately)  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:	Mr./Ms. _____  Male / Female / Others  GEN / SC/ ST/ OBC(NCL)/EWS/PwD  _____  _____  _____  _____  _____
<b>2. Address for correspondence:</b>	
<b>3. Education Details:</b> <b>a. 10<sup>th</sup> Std.:</b> School Name:  Year of Passing:  Aggregate %/Grade:  <b>b. 12<sup>th</sup> Std:</b>  School / College Name:	_____  _____  _____  _____  _____

<p>Year of Passing:</p> <p>Aggregate%/Grade:</p> <p><b>c. Present Programme of study:</b></p> <p>College Name:</p> <p>Programme:</p> <p>Duration:</p> <p>Year of Joining:</p> <p>Year of completion:</p> <p>Present year of study:</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>4. <b>Academic Achievements:</b> (awards, medals, etc. if any)</p>	
<p>5. Name of the JNCASR Faculty member with whom you wish to carry out project work:</p>	<p>Dr./Prof. _____</p> <p>Unit/Dept.: _____</p>
<p>6. Area (s) of Interest:</p>	

7. Description of the proposed Project Work:

8. Duration of the proposed Project Work:

From: \_\_\_\_\_ to \_\_\_\_\_

Signature of the Applicant: \_\_\_\_\_

**Submitted through:**

**Date:** \_\_\_\_\_

Signature of the Principal/HOD: \_\_\_\_\_

Name: \_\_\_\_\_

Seal:

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