

# ADVANCED INSTITUTE FOR WILDLIFE CONSERVATION APPLICATION FORM

**Post Applied:** \_\_\_\_\_

**Post Code:** \_\_\_\_\_

**Category:** General/SC/ST/OBC/Physically Handicapped, please indicate \_\_\_\_\_

1. Name of the applicant: \_\_\_\_\_

**A. Present Postal Address with Pin Code**



*passport size photograph*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Phone/Fax #* \_\_\_\_\_

*E mail* \_\_\_\_\_

**B. Permanent Residential Address with Pin Code** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Phone/Fax #* \_\_\_\_\_

*e-mail* \_\_\_\_\_

2. Date of birth \_\_\_\_\_ Age in years (as on 1st January 2023) \_\_\_\_\_

3. If belonging to SC/ST/BC/MBC, state name of the Caste/Tribe \_\_\_\_\_.

A photo copy of the original caste certificate issued by competent authorities may be attached.

4. (a) Academic Achievements:

Examination Passed	Year	University	Major Subject	Percentage of marks obtained
Higher Secondary				
Bachelor's Degree				
Master's Degree				

- (b) Creative Achievement (State briefly your bio data as research worker/giving details of research papers, participation in Seminar, Symposium, Conference, etc.). Furnish this information in a separate sheet.

5. Have you received any scholarship/fellowship before applying for this award? *(If so, please give its source, value, period and details of work done under that award)* \_\_\_\_\_

Name of the Scholarship	Awarding Agency	Period		Amount
		From	To	

6. Employment held so far *(up to date)*:

Name of the Employer	Position held	Period		Emoluments per month
		From	To	

7. Research publications, title of the publication, year of publication, journal, etc., may be indicated *(reprints may be enclosed)*. Details may be given in a separate sheet.

8. Seminar/Symposium/Workshop/Conference attended *(Documentary proof(s) may be enclosed)*.

9. Extracurricular activities. *(Details may be given in a separate sheet)*.

10. National Parks, Sanctuaries & Forest areas visited, and a paragraph on self interest in the field of Wildlife Conservation & Research *(attach a separate sheet)*.

11. Name, Complete Postal Address and Phone Number of three referees should be given below.

- 1.
- 2.
- 3.

12. Certified that information furnished above are correct to the best of my knowledge.

Place:

Date:

(Signature of the Applicant)