

**Application for Training Programme under ICAR-SC Sub-Plan**

\*Name of the Training Programme:

Duration – 30 days residential within the University campus.

\*Name :

Father's Name :

Address :

\*Mobile No. :

Mail ID (if any) :

Educational Qualification :

\*SC certificate issuing authority and date (attach its copy) :

\*Land holdings ..... Bigha

\*Voter Card No. (attach its copy) :

\*Adhar Card No. (attach its copy) :

\*Savings Bank A/C No. :

\*Name of the Bank :

\*IFSC Code of the Bank:

\*Photocopy of First page of Bank Account should be attached.

Experience in different agricultural operations :

(Selection will be made and communicated after screening subject to availability of seats for particular slot.)

\* Essential

Date :

Place :

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Signature

Recommended by

DDA/ADA/DDH/DRDC/Any other Govt. Bodies

Recent passport size colour photograph
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