

APPLICATION FORM FOR PARTICIPATION IN THE MODEL TRAINING COURSE

**“Climate Change and Abiotic Stress Management Strategies for
Enhancing Crop Productivity and Farmers Income”**

(January 4-11, 2020)

(To be sent directly to the Director, ICAR-NIASM/Course Directors of the Model Training Course)

Name :
Designation :
Present employer with full address :
Address for communication :
Telephone (R): (O) : Fax:
Email :
Date of birth : Sex : Male [] Female []
Extension, teaching, research, professional experience: Yes [] No []

Academic Record

Degree with Specialization	Year of Passing	Institute / University	OGPA
UG			
PG			
PhD			

Details of the training attended during the last two years

- 1.
- 2.

Signature of applicant with date and place

Recommendation of the forwarding authority

Date:

Place:

Certificate

Certified that the information furnished by the applicant is found to be correct.

Signature and designation of
the sponsoring authority