

Presidential Initiative – 'English as a Life Skill'

APPLICATION FOR THE AWARD OF 3 MONTH INDIAN GOVERNMENT SCHOLARSHIPS FOR THE TRAINING OF MASTER TRAINERS IN JOB-ORIENTED COMMUNICATIVE/SPOKEN ENGLISH AT THE ENGLISH AND FOREIGN LANGUAGES UNIVERSITY (EFLU) OF HYDERABAD, INDIA

Project Co-ordinating Officer, Presidential Programme Unit, Ministry of Education,
4th Floor, Isurupaya, Battaramulla

Tel: 0113-133925

Fax:0112-784871

For Office Use Only:

Received

This application form must be returned via registered post on or before Friday, July 22, 2011, to the above address.

A. PERSONAL

1. Name of Applicant: *Enter full name and underline surname*

Mr./Mrs./Ms./Dr.

Other names:

2. Address: *Indicate preferred address for communication*

Permanent:

⌒

Fax:

Email:

Official:

⌒

Fax:

Email:

3. Division:

Zone:

District:

Province:

4. Date of Birth

Y

M

D

5. Marital Status

Single

Married

Widowed

Divorced

B. EDUCATIONAL QUALIFICATIONS *

| Institution or University | Name of the Degree/Diploma | Duration | | Effective Date |
|---------------------------|----------------------------|----------|-----|----------------|
| | | From: | To: | |
| • | | | | |
| • | | | | |
| • | | | | |
| • | | | | |

E.4. PUBLICATIONS AND ARTICLES PUBLISHED:*

| Name of the Publication/Article | Benefits to Education Sector |
|---------------------------------|------------------------------|
| | |
| | |
| | |
| | |
| | |

F. ANY OTHER AREA OF SPECIALIZATION:*

G. DECLARATIONS/ RECOMMENDATIONS & APPROVALS:

1. Declaration of the Applicant:

I do hereby certify that the above particulars mentioned herein are true and correct to the best of my knowledge.

In the event of my being selected, I agree to abide by the relevant rules and regulations of the course and to complete the training up to the utmost satisfaction of the sponsor.

Further, I am fully aware and agreeable to sign an agreement and to be attached to any of the Teacher Centres on the service requirement of the 'English as a Life Skill' programme on my return after completing the course.

Signature: _____

Date: _____

**2. Recommendation of the Principal/Head of the Institution:
Leave Particulars of the Applicant:**

| Year | No. of Leaves Obtained | | | | |
|------|------------------------|---------|----------|------|---------|
| | Casual | Medical | Vacation | Duty | Balance |
| 2006 | | | | | |
| 2007 | | | | | |
| 2008 | | | | | |
| 2009 | | | | | |
| 2010 | | | | | |

I do hereby certify that the above particulars mentioned herein are true and correct as per the documents filed of record in this office and recommend that he/she has the full capacity to pursue serious academic work in the context of a mid-career professional programme.

In the event of selection of the above applicant for the above scholarship, I hereby recommend to release him/her from the school enabling him/her to participate in the course and to be attached thereafter, to the Teacher Centre nominated by the Ministry of Education.

Name & Title: _____

Signature: _____

Date: _____

Rubber Stamp: _____

3. Recommendation of the Zonal Director of Education:

I do hereby certify that the above particulars mentioned herein are true and correct as per the documents filed of record in this office.

In the event of selection of the above applicant for the above scholarship, I hereby recommend to grant leave and per-diem to the applicant and to release him/her from the school/institute enabling him/her to participate in the above course and to be attached thereafter, to the Teacher Centre nominated by the Ministry of Education.

Name & Title:

Signature:

Date:

Rubber Stamp:

4. Recommendation of the Provincial Director of Education:

I do hereby certify that the above particulars mentioned herein are true and correct as per the documents filed of record in this office.

In the event of selection of the above applicant for the above scholarship, I hereby recommend to grant leave and per-diem to the applicant and to release him/her from the school/institute enabling him/her to participate in the above course and to be attached thereafter, to the Teacher Centre nominated by the Ministry of Education.

Name & Title:

Signature:

Date:

Rubber Stamp:

5. Approval of the Secretary to the Ministry of Education/Provincial Secretary of Education:

I do hereby approve to grant leave and per-diem to the above applicant and to release him/her from the school/institute enabling him/her to participate in the above course and to be attached thereafter, to the Teacher Centre nominated by the Ministry of Education.

Name & Title:

Signature:

Date:

Rubber Stamp:

NB.: PI. note that in the event of being selected for the above scholarship, you should produce supported documents at the interview (a set of copies with originals) in proof of the given information.*