

## JYOTSHNA RANJAN FOUNDATION (JRF)

## INDUSTRIAL / PHARMACEUTICALS TRAINING PROGRAMME APPLICATION FORM

Name of the Student		Affix Photo
Date of Birth / Place of Birth		
Qualification		
Aadhar Number & Email		Email:
Father's /Mother's Name		
Father's/ Mother's Occupation		
Address Of Correspondence		
Permanent Address		
Marks Obtained in Class 10	Name of School	
/Matriculation	CGPA:	%:
Class 12 Marks Obtained /I.Sc	Name of School	
	CGPA:	%:
Terms and Conditions of scholarship:		
<ul> <li>Selection of applicant is solely at the discretion of JRF management.</li> <li>Selected candidate to pledge participation in the JRF activities and to take associate membership of the foundation.         I solemnly affirm that all above information are correct to the best of my knowledge. I also take a pledge that I will remain associated with the social development programme of JRF in all my capacity.     </li> </ul>		

Date and place

Signature of the applicant