## APPLICATION FORM FOR INTERNSHIP SCHEME OF THE PFRDA Name and full address of the institution: (Latest Passport Size photograph of the applicant) Phone number of sponsoring institution: **BIO DATA** Full Name (Mrs/Ms/Mr) (Surname First) Full Postal Address for communication (including email address) E mail Residence Mobile

| lucational |  |  |
|------------|--|--|
|            |  |  |
|            |  |  |
|            |  |  |

| Exam                     | University/Institute                        | Year<br>passing | of   | % of Marks    | Subject<br>(Arts/Commerce/Science/Techetc.)                               |
|--------------------------|---|-----------------|------|---------------|---|
|                          |   |                 |      |               |   |
| (Attach ad<br>Additional | Iditional sheets, if require Qualification: | ed)             |      |               |   |
| Subject of               | specialization/interest:                    |                 |      |               |   |
|                          |   |                 |      |               |   |
| Extracurrio              | cular activities:                           |                 |      |               |   |
| Past Proje               | ects Undertaken:                            |                 |      |               |   |
|                          |   |                 |      |               |   |
| project wh               |   | interest to th  | e ir | ntern and PFR | <u>.pfrda.org.in</u> before deciding the DA. Further, note that it may no |
|                          |   |                 |      |               |   |

Preferred duration/ time period for the internship: (Please specify months)

The applicants are also required to submit a write-up, in typed or their own hand and duly signed, not exceeding 500 words, on why they would consider this programme useful and how it fits in with their career prospectus.

I certify that above information furnished by me is true to my knowledge and belief. I also agree that in the event of any misrepresentation and /or falsification of information, my internship shall be liable for termination without notice and without prejudice to any other administrative/ legal proceedings that PFRDA may deem fit to initiate.

| - ·     | J | • |            |
|---------|---|---|------------|
| Place : |   |   |            |
| Date :  |   |   |            |
|         |   |   | Signature: |
|         |   |   | Name :     |

## Authentication of particulars furnished above by the Institute /University

This is to certify that the information by Mrs/MS./Mr . \_\_\_\_\_\_ in the form of application above is correct to the best of our knowledge.

The Institute/University recommends the applicant for the internship in PFRDA.

(Signature & Seal of Authorised Official)