## Application for Internship Programme GOVERNMENT OF INDIA MINISTRY OF RAILWAYS (RAILWAY BOARD)

Passport size photograph with full signature of the candidate

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| 1        | 0   | В        |          | L       | Е       |            |       | (in   | bloo | ek le | tters | 5) |     |  |   |            |          |              |              |           |     |          |   |   | <u> </u> |
| 1        | 0   | В        |          | L       | Е       |            |       | (in   | bloo | ek le | tters | 3) |     |  |   |            |          |              |              |           |     |          |   |   | <u> </u> |
|          | 0   | В        |          | L       | Е       |            |       | (in   | bloo | ek le | tters | 3) |     |  |   |            |          |              |              |           |     |          |   |   | <u> </u> |
|          | 0   | В        |          | L       | Е       |            |       | (in   | bloo | ek le | tters | 5) |     |  |   |            |          |              |              |           |     |          |   |   |          |
|          | 0   | В        |          | L       | Е       |            |       | (in   | bloo | ck le | tters | s) |     |  |   |            |          |              |              |           |     |          |   |   |          |
|          | 0   | b)       |          | Perma   | E       |            |       | (in   | bloo | ek le | tters | 5) |     |  |   |            |          |              |              |           |     |          |   |   |          |
| Γ        | O ( | b) L     | P        | L Perma | E       |            |       | (in   | bloo | ek le | tters | 5) |     |  |   |            |          |              |              |           |     |          |   |   |          |
| <u>Γ</u> | O ( | b)  L X  | P        | Perma   | E       |            |       | (in   | bloo | ek le | tters | 8) |     |  |   |            |          |              |              |           |     |          |   |   |          |
| -        | O ( | b) L X B | P        | L Perma | E O O E | t add      | Iress |       | -    | ek le | tters | 8) |     |  |   |            |          |              |              |           |     |          |   |   |          |

| 5.<br>S.        | Educational Qualification  Degree/Qualification | ion(s) (Highest to be mentioned Name of                          | Univ./Board       | Marks          | Year       |  |  |  |  |  |  |
|-----------------|---|--|-------------------|----------------|------------|--|--|--|--|--|--|
| No.             | acquired  | College/school/institution                                       | Omy,/Board        | obtained       | 1 Cai      |  |  |  |  |  |  |
|                 | •   |  |                   | (% age)        |            |  |  |  |  |  |  |
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|                 |   | <u>;</u> .   |                   |                |            |  |  |  |  |  |  |
|                 |   |  |                   |                |            |  |  |  |  |  |  |
|                 |   |  |                   |                |            |  |  |  |  |  |  |
| 6.              | (a) Details of projects (b) Present status:     | undertaken, if an:   |                   | ·              |            |  |  |  |  |  |  |
| 7.              | Discipline(s) in which                          | internship is sought   |                   |                |            |  |  |  |  |  |  |
| 8.              | Specific area(s) of wo                          | rk (in block letters) for the inter                              | nship, in order o | of priority    | _          |  |  |  |  |  |  |
|                 | (i) ·   |  |                   |                |            |  |  |  |  |  |  |
|                 | (ii)  |  |                   |                |            |  |  |  |  |  |  |
|                 | (iii)   |  |                   |                |            |  |  |  |  |  |  |
| 9.              | Location/City preferre                          | d:   |                   |                |            |  |  |  |  |  |  |
| 10.             | Duration months:                                | ]  |                   | :              |            |  |  |  |  |  |  |
| 11.             | Any other relevant inf                          | ormation:  |                   |                |            |  |  |  |  |  |  |
| 12.             | I certify that the inform                       | mation furnished above is true to                                | o the best of my  | knowledge ar   | nd belief: |  |  |  |  |  |  |
|                 |   |  |                   |                |            |  |  |  |  |  |  |
| Date:<br>Place: |   |  | (5)               | gnature of the | candidate  |  |  |  |  |  |  |
| Authe           | ntication of particulars f                      | furnished above by the Institute/                                | University        |                |            |  |  |  |  |  |  |
| applic          | •   | ormation furnished by Mrs./Ms. the best of our knowledge. culty. | /Mr               | in t           | he form o  |  |  |  |  |  |  |
| 1.              |   |  |                   |                |            |  |  |  |  |  |  |
| 2.              |   |  |                   |                |            |  |  |  |  |  |  |

(Signature & Seal of Authorized Official)