



भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान भोपाल
Indian Institute of Science Education and Research Bhopal

Application Form for Internship

Summer Internship (June - July): Last date for receiving the application is 15th April
Winter Internship (December): Last date for receiving the application is 1st November

1. Full Name (Ms/Mr):
2. Date of Birth:
3. Name of Degree being pursued:.....(Specify degree and subject)
Year of study: From: To:.....
4. Name and department of the faculty contacted for internship in IISER Bhopal:
.....
5. Dates of internship proposed: From.....To:.....
6. Address for Correspondence:.....
.....
Contact No. (Self):.....(Parent/Guardian):.....E-mail:.....
7. Do you require hostel & mess facility: Yes/No.
8. Educational Details (enclose attested copies of mark/grade sheets):

Degree/ Exam	College/School	University/ Board	Year	Class	% Marks or Grade	Rank in Class	Subject
UG							
PG							
Others							

9. Area of research interest:

I certify that the information above is correct. If selected for internship at IISER Bhopal, I agree to abide by all rules and regulations of IISER Bhopal and pay the required fees.

Signature of Candidate

Endorsement from student's parent Institute

I certify that (Ms/Mr.).....is a student of(degree)
studying inyear in our college/University/ Institute and internship of
days/months in IISER Bhopal will be beneficial for her/his studies.

Date:

Place:

Signature and seal of Head of the
Department /Principal/Director

For office use only

Forwarded

Recommended

Approved

Guide/IISERB Faculty

Head of Department

Dean, Academic Affairs

Guidelines:

1. No financial assistance will be provided.
2. Institute does not guarantee for any hostel accommodation which is subject to availability only.
3. ₹ 625/- per month will be charged for hostel seat rent, water and electricity charges. Charges will be levied in the multiples of 15 days. No intermittent charges will be applicable. This is subject to revision from time to time.
4. Mess will be charged as per actual rates, payable to the mess contractor.
5. After successful completion of internship, certificate will be issued by Faculty In-charge.

Request for Hostel Accommodation

Name: DoB:

Gender: (Male/Female):

Duration of Summer/Winter Internship: From To

Signature of Student

Name and Signature of Guide

Date:

Hostel Approval

Allotted Room No: Hostel No:

Signature of Hostel Caretaker

Signature of Dean/Dean-in-charge
Students' Affairs
