



Intensive Field Training (IFT)

■ CertPPP ■

CERTIFICATE IN PROJECT PLANNING & GRANT WRITING

5-8 September 2011 * Kathgodam, Nainital (India)

APPLICATION FORM

Name:

Title: Dr/Mr/Mrs/Ms/Fr

Age:

Current Position/Designation:

Name of Organization:

Full Address:

PIN:

Telephone: O:

M:

E-mail:

Web:

Education:

Work/Field Experience (in years):

Working Language: English/Hindi:

Previous Training on Project Planning & Grant Writing, if any:

Why do you want to attend this training? Please write a paragraph. :

Declaration from the applicant

(please tick the boxes)

- I am responsible for the payment of requisite fee to be enrolled in this training. I understand that I will be enrolled finally once my payment is received by GI.
- I will be responsible for my travel arrangements to attend the said training.
- I shall follow the discipline and training rules during training sessions. I shall not violate the decorum and shall not drink or smoke during the training. If I am found troubling, misbehaving, or disturbing the healthy proceeding of the training, the organizer may cancel my candidature to continue the training.
- I understand, read and write English/Hindi in order to undertake training.
- I have read and understood the information regarding the training (available at website: <http://www.grassrootsinstitute.in/> and I agree on the facilities committed to be offered by the training organizer.
- I understand the essence of 'participatory training' and would contribute to enrich the content with my knowledge and experiences.
- I shall contribute to make this training a memorable event for everyone by cooperating with all proceedings.

Date:

Place:

Signature of Applicant:

Approval from Head of Institution

I approve the application of our team member who fulfills the conditions to participate the training. In case of any problem, I can be contacted.

Signature of Head of Institution:

(with Full Name, Mobile No. & E-mail)

Name & Seal of Organization:

STEPS TO SUBMIT THIS APPLICATION:

1. Please submit this Application Form (without Approval of Head of Institution) immediately by e-mail to Grassroots Institute: grassrootsinstitute@gmail.com
2. Once you get approval from us, please get Approval of Head of Institution on hard copy of this Application Form, and send it with DD by SPEEDPOST or AIRMAIL (not by courier) to: Mr. Chuni Lal, Coordinator Training, GRASSROOTS INSTITUTE, Top Floor, PO Building, Banjar – 175 123 Distt. Kullu (HP), Tel: 01903-200202, +91-9418133427 Fax: +91-11-26936366 India . DD should be drawn in favour of GRASSROOTS INSTITUTE payable at Delhi.