



INDIAN INSTITUTE OF FOREST MANAGEMENT BHOPAL, INDIA

M.Phil. COURSE IN NATURAL RESOURCE MANAGEMENT APPLICATION FORM 2011-12 BATCH

No.....

Instructions for the Applicant

**SELF ATTESTED
PASSPORT SIZE
PHOTO**

- Type or print the answers clearly and completely.
- To be sent along with supporting document
- Incomplete applications will not be entertained.
- Demand Draft for Rs. 500/- should be drawn in favour of Director, IIFM, Bhopal, payable at Bhopal
- Completed application form along with DD for Rs 500/- must reach IIFM latest by July 5th, 2011

Category A. In - Service Officers

B. Other Category

A. PERSONAL DATA	
1. Name	
2. Father's Name	
3. Sex : Male / Female	
4. Nationality	
5. Date of Birth (attach certificate)	
6. Marital status	
7. Designation & Pay Scale Rs.	
8. Affiliation / Office / Organisation/ Institute (if applicable)	
9. Mailing Address	
Telephone	(O)_____ (R)_____
Fax	
E-mail	
10. Permanent Address	
11. Do you belong to SC/ST/OBC Physically Disabled (Enclose the certificate from the competent authority) (Applicable only for other category candidates)	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">SC <input type="checkbox"/></div> <div style="border: 1px solid black; padding: 2px;">ST <input type="checkbox"/></div> <div style="border: 1px solid black; padding: 2px;">NC-OBC <input type="checkbox"/></div> <div style="border: 1px solid black; padding: 2px;">PD <input type="checkbox"/></div> </div>
12. Score of UGC/CSIR/ICAR-NET/PGDFM	

(B) EDUCATIONAL RECORD (List in reverse order)
Enclose attested / Photo copies of certificates

S.No.	Degree / Certificate	Year	Div./Grade & %	University / Board	Subject

C. PRESENT EMPLOYMENT RECORD (Enclose the certificates of work experience from the competent Authority)

1. Position Held (with date & duration) : _____

2. Employer : _____

3. Address of Employer : _____

4. Type of Organisation (Government (Central/State/Non-Government / Industry University / Research / International / any other)

5. Objectives & Activities of Organisation : _____

PAST EMPLOYMENT DETAILS (List in reverse order)

S.No.	Designation	Organisation	Duration (From to)	Job Profile	Regular/Part time

(D) LANGUAGE PROFICIENCY

1. Mother Tongue : _____

2. Language (s) used in secondary school : _____

3. Language (s) used in higher education : _____

4. English Language Proficiency (please put tic mark)

	Excellent	Good	Fair	Poor
Read	_____	_____	_____	_____
Speak	_____	_____	_____	_____
Write	_____	_____	_____	_____

(E) TRAINING Enclose attested / Photo copies of certificates / diploma				
S.No.	Particulars	Institution	Duration	Remarks (Certificate / Diploma)

(F) PUBLICATION
List your significant publications in journals / book, etc. if any. (attach separate sheets, if required)

(G) LIST OF DOCUMENTS ENCLOSED

1.	4.
2.	5.
3.	6.

I (applicant), certify that the statements made by me in answer to the above questions are true, complete and accurate to the best of my knowledge.

Date : _____ Signature _____

(H) STATEMENT BY THE EMPLOYER (In case of employed persons only)

1. I, the undersigned, being authorised to supply the following particulars hereby certify that Mr./Mrs. _____ is employed by my Organisation and has been nominated for M.Phil Programme in Natural Resource Management.

2. Please explain why this programme is important to the applicant's work area and also for your Organisation.

3. Do you assure that, his/her salary will continue to be paid in part or in full during the study period?

4. Do you assure that if after the completion of the course, the candidate will be offered a position equivalent to that he/she holds at present?

5. Name (of person)

Position

Name of organisation

Date

Signature with official stamp

MAIL TO :

Chairperson – MRM Admissions
Indian Institute of Forest Management
Nehru Nagar,
Bhopal – 462 003. (MP) INDIA

Tel.	:	91-0755-2773799	Fax :	91-0755-2772878
	:	91-0755-2775716		
Email	:	mrm@iifm.ac.in		
Internet	:	http://www.iifm.ac.in		

LAST DATE OF RECEIPT OF FILLED IN APPLICATIONS : JULY 5th, 2011

LETTER OF REFERENCE

*(TO BE SENT TO : CHAIRPERSON MRM ADMISSIONS,
INDIAN INSTITUTE OF FOREST MANAGEMENT,
NEHRU NAGAR, BHOPAL - 462 003 INDIA)*

Applicant's Name _____

Referrer's Name _____

Designation _____

Organisation _____

Address _____

Telephone _____ Gram _____ Fax _____

How long have you known the applicant? _____

In what capacity? _____

Please use the space for giving your general assessment about the applicant's strength and weakness, achievements etc.

Referer's Signature

With seal

Date :