



## APPLICATION FORM

### MATA CHARAN KAUR RATAN AWARD FUNCTION

Last Date of Application: **October 2015**

Application for National & International Deligate

PHOTO  
(To add Photo)

**\* Required**

| 1. PERSONAL INFORMATION                                     |   |
|---|---|
| Title *   | Please select one: <input type="checkbox"/> Prof <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms |
| Full Name *   | First Name: _____ Last Name: _____  |
| Gender *  | <input type="checkbox"/> Male <input type="checkbox"/> Female   |
| Date of birth *<br>(dd/mm/yyyy)                             | / /   |
| Nationality *   |   |
| Passport Number *<br>(For Foreigners)                       |   |
| Date of issues *  | Date of expire *  |
| Place of issues *   |   |
| Country *   |   |
| Telephone<br>(inclusive of country/area code)               | Home : _____<br>Mobile * : _____  |
| Fax (inclusive of country/area code)                        |   |
| Email Id *  |   |
| Skype *   | Facebook *  |
| Full Mailing *<br>Address<br>(P.O Box Address NOT Accepted) |   |
| 2. ORGANISATION'S / INSTITUTION DETAILS                     |   |
| Name of Organization *                                      |   |
| Full Address *<br>(P.O Box Address NOT Accepted)            |   |
| Position *  |   |
| Email Address *   |   |
| Telephone *<br>(inclusive of country / area code)           | Office: _____   |
| Fax (inclusive of   |   |

|                      |  |
|----------------------|--|
| country / area code) |  |
|----------------------|--|

|                  |  |
|------------------|--|
| Website (if any) |  |
|------------------|--|

### 3. APPLICANT BACKGROUND

**What is your current main occupation?** (e.g.. student, intern, volunteer, professional, looking for employment, etc.). **Please provide more details** (e.g. sector of employment, level and discipline of studies, etc.)**(not more than 100 words): \***

### 5. ACCOMMODATION, MEALS AND TRAVEL \*

**The organizers for this event will not responsible for the following:**

- i. Airport transfer for pick-up/departure **(It is on participant, not on organisation)**
- ii. Accommodation and meals (breakfast, lunch and tea breaks) during the event, organisation is not responsible. It is on participant.

### 6. FLIGHT INFORMATION (Where Applicable)

Flight No & expected date of **arrival**: \_\_\_\_\_

Flight No & expected date of **departure**: \_\_\_\_\_

### 7. UNDERTAKING \*

**Declaration of the Applicant:**

**By submitting this Application Form I, \_\_\_\_\_ hereby certify that the information given is accurate. I confirm that all the information given in this form is correct and complete. I also confirm that I agree to the following conditions of participation:**

- I will not arrive late or depart early;
- I understand that the Mata Charan Kaur Society reserves the right to exclude the participant from the course in case information given in the form proves to be incorrect or because of misconduct at the training site.

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### 8. CANCELLATION AND SUBSTITUTION

In case you are unable to attend the **“Mata Charan Kaur Ratan Award Function”**, request for cancellation or substitution must be received in writing to Mata Charan Kaur Society via email or fax **at least 15 days prior to the start of the Function.**

## 9. Checking your Application Form:

- The Application Form is duly completed in **English** \*
- The Application Form is in **Word Format (not PDF)** \*
- The Application Form is saved with this format: **Country\_FIRST NAME\_Last Name.doc** \*

### To enclose:

- **A scan of the identification page of your passport** (Only photo page) – save as PDF format \*
- **Your Passport size photograph** \*
- **Endorsement Letter from University / Organization / NGO / Ministry / etc. (Maximum 1 A4 size page)** \*

### Submitting your Application Form:

You need to send your Application Form by email to [matacharankaur@gmail.com](mailto:matacharankaur@gmail.com) with the email subject line in this format “**Country\_FIRST NAME\_ Last Name**”.

Please send **only one email with all attachments. Incomplete applications will not be reviewed and considered.**

## 10. APPLICATION DEADLINE

Your complete Application Form must reach the organizers of the **Mata Charan Kaur Ratan Award Function** on April at the very latest. **Application Forms received after this deadline will not be considered.**

***For more information, please contact:***

***Mata Charan kaur Society***

Tel : +91-183-5060598, Mob: +91-98151-52577

Fax : +91-183-5060598

Email : [matacharankaur@gmail.com](mailto:matacharankaur@gmail.com)

Website : [www.matacharankauredusociety.in](http://www.matacharankauredusociety.in)

Facebook : <https://www.facebook.com/profile.php?id=100004940257591>

Twitter : <https://twitter.com/mck19762>

GooglePlus : <http://plus.google.com/u/0/11445507990900536621/about>

**Your verification of participating is send you on your Email Id.**

**This Section is to be filled by Mata Charan Kaur Edu Society**

Date Received: \_\_\_\_\_ ID No. : \_\_\_\_\_

**Do not alter the format of this form**