



INDIAN INSTITUTE OF FOREST MANAGEMENT BHOPAL

M.Phil. IN NATURAL RESOURCE MANAGEMENT APPLICATION FORM 2018-19 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 documents
- Completed application form along with Demand Draft for Rs. 500/- in favour of Director, Indian Institute of Forest Management, payable at Bhopal should reach IIFM latest by 4th May, 2018.
- Incomplete applications will not be entertained.

Category A. In - Service Officers

B. Open 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. (if applicable)	_____								
8. Employer	_____								
9. Mailing Address	_____ _____ _____								
Telephone	(O)_____ (R)_____								
Fax	_____								
E-mail	_____								
10. Permanent Address	_____ _____ _____								
11. Do you belong to SC/ST/OBC/DA (Enclose the certificate from the competent authority)	<table border="1"><tr><td>SC</td><td><input type="checkbox"/></td><td>ST</td><td><input type="checkbox"/></td><td>NC-OBC</td><td><input type="checkbox"/></td><td>DA</td><td><input type="checkbox"/></td></tr></table>	SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	NC-OBC	<input type="checkbox"/>	DA	<input type="checkbox"/>
SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	NC-OBC	<input type="checkbox"/>	DA	<input type="checkbox"/>		
12. Have you qualified UGC/CSIR/ICAR-NET	<table border="1"><tr><td>Yes</td><td><input type="checkbox"/></td><td>No</td><td><input type="checkbox"/></td></tr></table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>						
13. If PGDFM, indicate OGPA									

(B) EDUCATIONAL RECORD (Height Degree First upto Higher Secondary) Enclose attested Photo copies of certificates					
S.No.	Degree / Certificate	Year	Div./Grade & %	University / Board	Subjects

(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 _____

Telephone & Email ID _____

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

5. Objectives & Activities of Organisation : _____

(D) PAST EMPLOYMENT DETAILS (List in reverse order)					
S.No.	Designation	Organization	Duration (From to)	Job Profile	Regular/Part time

(E) Languages

Indicate proficiency in speaking reading and writing of each language by 'excellent', 'good' or 'poor'.

Language Know	Speaking	Reading	Writing
1			
2			
3			
4			

(F) TRAINING Enclose attested / Photo copies of certificates / diploma			
S.No.	Particulars / Topic	Institution	Duration with Date

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

(H) LIST OF DOCUMENTS ENCLOSED

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

I _____, certify that the statements made by me in the form are complete and accurate to the best of my knowledge.

Date : _____ Signature _____

(I) 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 in 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 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)

Designation

Phone No. & email ID

Date

Signature with official stamp

MAIL TO :

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

Tel.	:	91-755-2768331, 2763925, 2763924, 2766603, 2775703
Fax	:	91-755-2671929
Extn.	:	339, 349, 452
Email	:	mphil@iifm.ac.in
Internet	:	http://www.iifm.ac.in

LAST DATE OF RECEIPT OF FILLED IN APPLICATIONS : May 04, 2018

LETTER OF REFERENCE

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

Applicant's Name _____

Referrer's Name _____

Designation _____

Organisation _____

Address _____

Telephone _____ Fax _____

Email ID _____

How long have you know the applicant? _____

In what capacity? _____

Please write your assessment about the applicant's strength and weakness, achievements etc. (attach separate sheet, of required).

Referer's Signature

With seal

Date :

