Yashwantrao Chavan Academy of Development Administration

Raj Bhavan Complex, Baner Road, Pune 411 007

Application Form for Post Graduate Diploma in Rural management

Instructions-

- Please read the instructions carefully before filling the form.
- Use black ball point pen in boxes using English Capital letters or English Numerals
- Do not make any stray marks on the sheet
- Write in Capital Letters only within the box without touching the lines as shown in the sample below.

1.Name of the candidate-

2.Name of the organisation-

3.Designation-

4.Date of birth- (dd-mm-yy) .

Age in complete years

(Write the relevant code in the box)

5.Territory Department/
A1- Urban
B2- Rural
C3-Tribal

6.Employment Status
A1-Govt.Employee
B2-Semi-Govt.
C3- Private Employee
D4- cooperative Sector
E5- Self-employed

7.Whether sponsored by the Organisation/Agency
A1-Yes
B2- No

8.Address- Office-

P I N

9.Address- Residential-

P I N

10.Telephone number (With STD code)

(O)	
(R)	
(Mo)	

11.Fax Number (With STD code)

(O)	
(R)	

12.E-mail address/ ID (Mandatory)

13.Educational Qualifications (Which make you eligible for the programme) -

Sr. No.	Qualification	Year of passing	Name of the Institution/University	Percentage/ grade	Remarks

14.Experience in the field of Rural Development (Which make you eligible for the programme) –

Sr. No.	Name of the Department/ Organisation/ institution	Post held	Duration	Remarks

15.Declaration by the applicant-

I hereby declare that I have read and understood the conditions of eligibility for the programme for which I seek admission. I fulfill the minimum eligibility criteria and have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to be cancelled by YASHADA at any time and I shall not be entitled to refund of any fee paid by me.

I have carefully studied the rules of YASHADA and shall abide to them.

Date- Signature of the applicant

16.Declaration by the sponsoring authority-

The nomination of Mr./Ms._____ has been sponsored by _____

And we are taking full liability of the payment of the course fees and the attendance to the contact sessions by the candidate. We are aware that the contact sessions are mandatory and residential at YASHADA and the institutional attachments are also mandatory. We are also aware that under no circumstances the candidate shall be exempted from the same.

Date- Signature of the Sponsoring Authority
With Seal

Kindly fill up the form and send it by Registered/ Speed post along with a DD of the course fees in favour of "**Director General, Yashwantrao Chavan Academy of Development Administration**" to
Additional Director General & Director, SIRD, Yashada,
Raj Bhavan Complex, Baner Road, Pune – 411 007
Phone No. (020) 25657360 / 62, 25650784, 25608171,
Fax No. (020) 25608265 / 25659135
Last date for sending applications is 16th August 2007.
For further details kindly contact Ms. Jyotsna Hirmukhe, Project Manager, PGDRM, YASHADA on 020-25608171 (O) or 9923021792 (M) or
Visit our website ***www.yashada.org*** for more details about the course.