GOVERNMENT OF INDIA MINISTRY OF EXTERNAL AFFAIRS

INDIAN TECHNICAL AND ECONOMIC COOPERATION (ITEC) AND SPECIAL COMMONWEALTH ASSISTANCE FOR AFRICA PROGRAMME (SCAAP) (Application for the courses fully funded by the Ministry of External Affairs, Government of India)

Please read instructions carefully before applying

APPLICATION FORM

3 x 4 cm

PART- I Nationality: Name of Course: Institute: Commencing: DD/MM/YYYY 1. Personal Particulars Name(s): Surname: Sex (tick one): MALE / FEMALE Marital Status: Date of Birth: Date - Month - Year Passport No .:-Date & Place of issue :- _ Valid till :-Address: Office Res. Tel Nos. Mobile/Cell: Fax: E-mail Special dietary needs, if any :

Person(s) to be notified in case of Emergency Official Contact			20000001/50001/00001
Name :		Personal / Family Contact	
Address:			
Tel Nos:		1	
Mobile /Cell :			
Fax:			
E-mail:			
Educational Qualification/(s)		15.5	1,058
Degree / Diploma / Certificates	Year	Na	me of Educational Institute
1	100		
2			
3			
	1.00	11	
4			
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Professional Qualification(s), if any: Professional Qualification (s)	Year		Name of Institute
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		la la	
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4	1		
2. Details of Employment/Profession (current & p	revious)		
Name of Employer / Department / Company	Position	Period	Description of Work
	1		
	1		
			49
Are you an employee of: (Mark appropriate box)			
	ant/Davastatal		
a. Government	ent/Parastatai		
c. Private company d. Others* (Please	se specify)		
Details of present employer :			
Name / address :			
Tel. No. :			100 C
F-mail:			

(i) If answer to 3	una(a) atta	adad if	italida i iai i a a a a a		
	urse(s) atte		utside your country:		
Country		Course De	etails & Duration	Year	Sponsor/Programme
 Please describ (a) qualification/e 	experience i	in the related to	the course applied	for; &	
(b) reason (s) for	аррупу к	or triis training (course.		
(b) reason (s) for	арріуіпд іс	r triis training (course.		
(b) reason (s) for	арріуіпд іс	r triis training (course.		
			ency (by Indian Miss	ion/Designate	ed Authority)
5. Certification of	English lar	nguage proficie		ion/Designate Remark:	
5. Certification of	English lar	nguage proficie			
S. Certification of Spoken	English lar Good	nguage proficie		Remarks	S
5. Certification of Spoken Written Mother tongue / N	English lar Good lative langua	nguage proficie Basic ge:	ency (by Indian Missi	Remarks	S

MEDICAL REPORT

(To be certified by a doctor/hospital on the panel of the Indian Mission, UN Mission, if any or as designated by Indian Mission)

(i) Name of Applicant:		
(ii) Age:		7.5
(iii) Sex: (Male /		(Tayle
Female)		
(iv) Height (cm):		
(v) Weight (kg):		
(vi) Blood Group:		
(vii)Blood Pressure: (viii) Blood Sugar: (Fasting) (F	PP)	
Is the person examined in good health at present?		
2. Is the person examined physically and mentally able to carry out intensive training away from home?		
3. Is the person free of infectious diseases (tuberculosis, trachoma, skin diseases etc)? Yellow fever certificate (in case of people coming from that region or as laid out in WHO Regulations).		
4. Does the person examined has any medical condition or defect which might require treatment during the course ?		
5. List of any observed abnormalities indicated in the chest X ray.		
I certify that the applicant is medically fit to undertake a	training course in India.	
Name of Doctor/Physician:		
Registration No.:		
Address of Clinic / Hospital		
and City / Town:		
Telephone:		
E mail:	Date:	
Signature of Doctor/Physician:	Seal of Clinic/Hospital:	

IMPORTANT NOTICE

- Please read the form carefully. The application will be automatically rejected if any column is inaccurate, incomplete or blank.
- Declaration by the candidate and the recommendations from employer, if any, are compulsory pre-requisites.
- Working knowledge of the English language is a pre-requisite. For English language and language related courses, basic knowledge of English is required.
- Candidates who leave the course midway for personal reasons without prior permission of the Ministry of External Affairs or remain absent from the programme without sufficient reasons are expected to refund the cost of training and airfare to Government of India.
- Female candidates are hereby advised that they should not travel to India to attend the course applied for in case they are in family way.

1,		
(Name, Mide	dle name, Family name)	
of (country	/)e, complete and correct.	certify that information provided by me in this
I also certi		
	- Control of the Cont	aware of the course contents and living conditions in India *.
	sufficient knowledge of English to parti	
(iii) I am m doctor.	edically fit to participate in the Course	and have submitted a medical certificate from the designated
(iv) I have	not attended any programme previous	ly sponsored by Government of India.
(v) I have it the period	not applied for or am not required to at of the course applied for.	tend any other training course/conference/meeting etc. during
If accepted	for the ITEC / SCAAP training progra	mme, I undertake to:
(a) Co	omply with the instructions and abide b	y Rules, Regulations and guidelines as may be stipulated by
bo	th the nominating and sponsoring Gov	remments in respect of the training;
(b) Fo	llow the full and complete course of st	udy or training and abide by the Rules of the
Ur	niversity/Institution/ Establishment in w	hich I undertake to study or undergo training;
	abmit periodic assessments / tests con escribed);	ducted by the Institute (progress report which may be
(d) Re	efrain from engaging in political activity	, or any form of employment for profit or gain;
(e) Re	eturn to my home country at the end of	the course of study or training;
(f) la	lso fully undertake that if I am granted	a training award, it may be subsequently withdrawn if I fail to
		ficient cause determined by the host Government.
For lady p	participants :- I confirm that I will no family way.	t travel to India to attend the Course I have applied for if I
Date:		
Place:		(SIGNATURE OF THE APPLICANT) Name:

PART - II

To be completed by the authorized official of the Nominating Government/Employer

l,	on behalf of the Government
of c	ertify that:
(a) I have examined the educational, profession form and I am satisfied that they are authentic a	nal and other certificates quoted by the nominee in Part -1 of this nd relate to the nominee.
he/she is medically fit and free from any infecti-	es and X-ray reports produced by the nominee which state that ous disease such as HIV/AIDS and Yellow Fever and that having here is no reason to indicate that the nominee is other than fit to aining in India.
(c) The nominee has adequate knowledge of training for which he/she is being nominated.	spoken and written English to enable him to follow the course of
(d) The nominee has not availed of ITEC/SCAA	P training facilities earlier in India.
I nominate Mr./Mrs./Miss	on behalf of the
Government of	/as employer.
Name of Nominating Authority:	
Designation:	
Address:	
Date: Place:	
riace.	
	Signature
	(With seal)
	Name and Designation
	(in block letters)

Some Guidelines

Who can apply

- Employees and officials in Government, Private and Public Sector, Parastatals, Universities, Chambers of Commerce and Industry
- Having 5 years minimum work experience
- Applicants who are between the age group of 25 to 45 years.
- Who are medically fit.

How to apply

- Applications must be submitted in the prescribed ITEC/SCAAP Form to the nodal Government Department/Agency of your country designated to nominate candidates.
- The nodal Department/Agency will in turn forward the applications to the Embassy/High Commission of India.

Eligibility criteria for admission to courses

- Must have the required academic qualifications as laid down by the Institute for the selected Course.
- Must have working knowledge of English to follow the Course.

Scholarship

Government of India will bear the following expenses for the selected candidate:

- · Return international airfare by excursion/ economy class
- Course fees
- Accommodation hostel(depending on availability, it could be on single or sharing basis) or hotel in case of non-availability of hostel accommodation.
- Living Allowance @ Rs. 25,000/- per month. Candidates are, among other things, expected to meet the
 expenditure for their meals from this amount.

General Information

- Applications must reach the Indian Embassy/High Commission no later than 3 months before the commencement of the Course.
- Upon selection, the Embassy/High Commission of India will inform the concerned nodal Department/Agency who will in turn inform the applicant.
- Selected candidates are required to fully familiarize themselves regarding living conditions in India and the Institutes through the websites of the concerned Institute.
- Decision for grant of scholarship rests solely with the Ministry of External Affairs, Government of India.

Contact Address:

The Joint Secretary
Technical Cooperation Division
Ministry of External Affairs
Government of India
Akbar Bhawan, Chanakyapuri
New Delhi - 110021, India

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Email: itec.tc@mea.gov.in
Website: http://itec.mea.gov.in