

Atomic Minerals Directorate for Exploration and Research
Application for AMD Studentship Programme (AMDSP) 2009-10

1. Name in Full

2. University / Institution

3. Department

4. Department Address

6. Contact No

| | | |
|----------|----------|--------|
| | | |
| STD Code | Landline | Mobile |

7. Email

5. Home Address

8. Gender (tick)

| | |
|---|---|
| F | M |
|---|---|

9. Date of Birth

| | | |
|----|----|------|
| | | |
| DD | MM | YYYY |

10. Details of Academic Record

| Exam / Degree | Branch / Subject | University / Institute | Year | % of Marks | Rank (if any) |
|---------------|------------------|------------------------|------|------------|---------------|
| X | | | | | |
| XII | | | | | |
| Bachelors | | | | | |
| Masters | | | | | |
| Year 1 | Sem 1 | | | | |
| | Sem 2 | | | | |
| Year 2 | Sem 3 | | | | |
| | Sem 4 | | | | |

11. Additional Information

a. Ranks / Awards obtained in University / State / National level examinations

| |
|--|
| |
|--|

b. Other Special recognition / Information

| |
|--|
| |
|--|

13. Preferred Project Details:

| | | | |
|-----------|--|-----------------------|--|
| Title | | | |
| Area | | | |
| District | | State | |
| Toposheet | | Target (Sq Km / L Km) | |

14. Period of Work (Tentative):

Date From

Date To

15. Declaration

I certify that the information given above are correct and accurate to best of my knowledge.

Signature of Applicant:

Date:

Name:

Place:

16. Approved / Recommended by:

The Department / University agrees to all the terms and conditions as mentioned in AMDSP Prospectus.

Signature of Head of
Department / Dean:

Date:

Name:

Place:

E-mail:

Seal:

Application may be submitted to:

The Additional Director (R&D),
Atomic Minerals Directorate for Exploration and Research,
1-10-153-156,
Begumpet, Hyderabad 500 629
E-mail: addldir-rnd.amd@gov.in