



Recognised under Sec 3(A) of UGC Act 1956
Accredited by NAAC with 'A' Grade

Yenepoya Research Centre
Yenepoya University
University Road, Deralakatte
Mangalore – 575018
Email: dydirectoryrc@yenepoya.edu.in
Ph: +91 8242204668, Extn: 2035

Yenepoya Research Centre

Project Internship

Students pursuing B.Sc/M.Sc/M.Tech degree in Biological sciences (Biochemistry/Microbiology/Life Science/Biotechnology/Bioinformatics) who are interested in undertaking their dissertation work/short term training at Yenepoya Research Centre can apply at least two months prior the proposed date of internship.

The applicant should attach filled application form in the prescribed format and submit along with the following documents:

- a. Recommendation letter from Principal/Head of the department of the college/university
- b. A copy of mark sheet of previous semester of the course
- c. Personal identity proof and copy of college/university ID card

Candidate should note that:

- Selection would be done on the basis of merit
- Selected candidates will have to remit a fee of Rs. 5,000/-
- The work will be carried out at Yenepoya Research Centre and the data generated would belong to Yenepoya Research Centre and it could not be reproduced in the form of a research paper by the trainee student or members from his/her department
- Selected candidates would be intimated by email within one week after receipt of duly filled application form.
- Any queries on this matter at YRC may be addressed to research@yenepoya.edu.in
Phone no: 2204668, Extn no: 2035



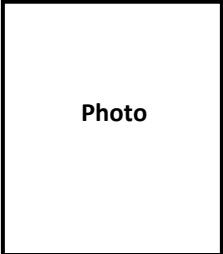
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APPLICATION FOR PROJECT INTERNSHIP 2016-2017
YENEPOYA RESEARCH CENTRE, YENEPOYA UNIVERSITY

(To be filled in by the Applicant in BLOCK letters)

[Incomplete applications will be rejected]



Photo

Name of the Applicant.....

Father's/Guardian's NameContact no.....

Mother's Name:Contact no.....

Date of Birth..... Gender:

Marital status:Mother Tongue.....

Nationality.....

Permanent Address:

Present / correspondence address

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.....

.....

Pin.....

Pin:

Phone No/Mobile.....

Phone No/Mobile.....

E-mail:

E-mail:

Other Details:

1. Project Internship from (DD/MM/YY):.....
to DD/MM/YY:
 2. Area of research:.....
 3. Academic information:-
 - Course to which the candidate is admitted:.....
 - Semester:.....
 - Name of the University/College/department:
 - Marks/grade obtained in the previous semester:
 - Name and contact details of the Head/chairperson of the department:
.....
.....
.....
- * Internal project guide if any,
Name and contact details:
.....
.....

DECLARATION BY THE APPLICANT

1. I..... declare that to the best of my knowledge and belief, the particulars furnished by me are true. If found untrue I am prepared to forego the seat.
2. Undertake to abide by all the rules and regulations relating to the university and the hostel framed from time to time.
3. Understand that the management has the full authority to expel the student for disinterest in studies, misbehaviour/misconduct, violation of rules and regulations.
4. Hereby declare that I know the financial obligation and I can afford and undertake to pay for the speciality chemical if any, needed for the project and also understand that the registration fees once paid will not be refunded for any reasons.

Signature of the Applicant

Place:

Date:

Signature of the HOD/Principal
with official seal