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**APPLICATION FORM: SHASTRI MOBILITY PROGRAMME (SMP) 2016-17**

**SECTION A: CATEGRY OF APPLICATION**

**Please tick the appropriate category of Shastri Mobility Programme applied for:**

🞏 Academic faculty 🞏 Administrator

**SECTION B: PERSONAL INFORMATION**

1. Last Name: First Name: Title:

2. Gender : Female 🞏 Male 🞏

3. Date of Birth:

4. Address:

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| --- | --- | --- |
| Correspondence:  Telephone: Mobile:  E‑mail : | Permanent:  Telephone: Mobile:  E‑mail : | Educational Institution:  Telephone: Mobile:  E‑mail : |

* **Communications about an award should be sent to**: Correspondence Address 🞏 Educational Institution 🞏

5. Nationality:

6. Holding a valid passport: Yes 🞏 or No 🞏

If yes, please write the passport number: Date of Expiry:

7. a) Highest academic Qualifications:

b) Discipline and/or Department within University/Institution:

c) Name of the University/Institution.

8. Language Abilities\*: English French Hindi

Oral 🞏 🞏 🞏

Written 🞏 🞏 🞏

\* Please indicate proficiency with corresponding letters: **E**xcellent (E), **G**ood (G), **F**air (F) or Nil (N).

9. Please provide a brief statement as an annexure outlining your background field(s) of specialty and particular areas of interest (maximum of 1000 words) and attach copies of your curriculum vitae and list of publications. (Please mention the Annexure Number here).

10. Please indicate whether you are associated with a SICI member institution.

11. Please list any awards previously received under

|  |  |
| --- | --- |
| (i) Shastri Indo-Canadian Institute | (ii) Any other (please specify) |
|  |  |

**SECTION C: PURPOSE FOR VISIT**

1. Please attach as an annexure a concise description of your purpose to visit to Canadian/Indian Institutions. (2,000 words) which will a) identify the key issues to be undertaken during the visit; b) indicate clearly both the nature and the scope of the visit’s contribution to internationalization of the curriculum/teaching and understand the recent developments in Canada/India; c) To improve teaching and administrative practices of higher education institutions by giving them international benchmarks; d) To help develop institution build capacity; e) facilitate linkages among leading academic institutions and knowledge partners by creating support networking among SICI member institutions and also promote institutional collaboration; f) Facilitate scholarly and academic exchange of the faculty members as well as research scholars of both countries; g) outline a general schedule of visit activities.(Please mention the Annexure Number here).

2. Area of interest:

3. Anticipated dates of departure and return (if awarded):

4. Proposed institution/university for affiliation (**in order of preference**) with full details of the contact person:

|  |
| --- |
| (i) |
| (ii) |
| (iii) |

**SECTION D: REFERENCES**

Names and addresses of **two academicians** who are giving letters of recommendation along with this application form. Letters of recommendation should explain the ‘referees’ professional relationship to the applicant and testify the competency of the applicant.

|  |  |
| --- | --- |
| 1) Name & designation with complete address | 2) Name & designation with complete address |
|  |  |

**SECTION E: Please check the appropriate boxes on the right indicating that the necessary materials are included with your application. THE APPLICANT IS RESPONSIBLE FOR ENSURING THAT THE APPLICATION IS COMPLETE. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

|  |  |
| --- | --- |
|  | Sent with Application |
| 1. One original completed Shastri Application Form (with original signature) | 🞏 |
| 1. One Electronic copy of the Shastri Application Form (In single pdf file includes all relevant document) | 🞏 |
| 1. Copy of the Passport | 🞏 |
| 1. Certificate of Ethical Approval (if applicable) | 🞏 |
| 1. Letters of reference from two academicians | 🞏 |
| 1. Letters of affiliation from affiliate | 🞏 |
| 1. Employer’s endorsement letter | 🞏 |

**SECTION F: ACCEPTANCE OF THE CONDITIONS OF AWARD**

I confirm that I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , is an academician/

educational administrator at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Signature of Applicant

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Place