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**APPLICATION FORM: SHASTRI MOBILITY PROGRAMME (SMP) 2017-18**

**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:

|  |  |  |
| --- | --- | --- |
| 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) University/Institution/Department with full address:

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 precise curriculum vitae (2-3 pages) and list of publications covering a period of **past 5 years only**. (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**

Please (✓) the purpose applicable in your case and attach an annexure (**extra separate sheets used)** providing a concise description the purpose opted to visit to Canadian/Indian Institutions. (2,000 words).

**Teaching Faculty**

1. Internationalization of the curriculum/teaching and understand the recent developments in Canada/India; 🞏
2. To learn new advanced pedagogy of the discipline in India or Canada; 🞏
3. Delivering lectures and talk as an specialist in the discipline of expertise in institutions in India or Canada relevant to SICI focus areas and priority areas of MHRD, Govt. of India; 🞏
4. To carry out small Research Project of 2-3 weeks duration in collaboration with Indian or Canadian faculty; 🞏
5. Top attend Seminar/workshop related to the subject that you are currently teaching in your institution; 🞏

**Educational administrators**

1. To learn the administrative practices of higher education institutions of India or Canada to give international benchmarks; 🞏
2. To facilitate linkages and institutional collaboration; 🞏
3. Initiation of MoU/academic partnership with Canadian or Indian Universities; 🞏
4. To attend Workshop on practical aspects of administration; 🞏

**SECTION D: ACTIVITIES SCHEDULE IN INDIA OR CANADA**

Please enlist the activities, meetings with people, institutions to be visited from Day one to the last day of stay of the award/fellowship in India or Canada.

**SECTION E: TOPIC/TITLE OF THE PROJECT**

1. Title of Project:
2. Area of interest:
3. Discipline (e.g. Literature, Chemistry, and Linguistics etc.)
4. Proposed institution/university for affiliation (**in order of preference**) with full details of the contact person:

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

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

**Departure: Return:**

**SECTION F: 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 G: 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.**

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| --- | --- |
| **List of Documents** | **Status (Put × or ✓)** |
| 1. One Electronic copy of the Shastri Application Form with applicants signature on it (In single pdf file includes all relevant document) at the GMS [www.shastriinstitute.org/gms](http://www.shastriinstitute.org/gms) | 🞏 |
| 1. Copy of the Passport | 🞏 |
| 1. Certificate of Ethical Approval (if applicable) | 🞏 |
| 1. Lettes of reference from two academicians | 🞏 |
| 1. Letter of affiliation/invitation from affiliate | 🞏 |
| 1. Employer’s endorsement letter | 🞏 |

**SECTION F: FORWARDING**

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| This is to certify that Prof./Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a  Faculty/academic Administrator of this University/Institution.  **Designation**:  \_  Name Institution      Signature Date Seal/Stamp of   Vice-Chancellor/Academic Dean/Registrar |

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

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

educational administrator at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ accepts the conditions of the Award.

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Date Signature of Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Place