## KERALA STATE BIODIVERSITY BOARD

## **Application form for Internship**

Name(s)		
Single / Group of students		
(If in group, please mention		
the names of all students		
seeking internship in a list)		
Educational Qualification		
Address of the institution		
Email		
Lman		
Mobile number/Landline		
Duration of internship		
Area of interest/Topic of the internship		
Whether permission letter		
from the institution head is enclosed	Yes	No

## **DECLARATION**

 $\rm I$  / We hereby declare that the above mentioned details are true to the best of my knowledge and have understood the terms in the guidelines.

Signature of the Applicant