



## MSME-DEVELOPMENT INSTITUTE, INDORE APPLICATION FORM FOR EMPANELMENT OF GUEST FACULTIES/RESOURCE PERSONS

Area of Exp	ertise/Specialization					
Name of the	Paste Recent Passport Size Photo					
[1] Name of the	Individual					
[2] Father/Hush	and's Name:					
[3] Mother Nam	e:					
[4] Permanent A	.ddress					
[5] Gender (Mal	e/Female/Others)					
[6] Mobile No.:	[6] Mobile No.:					
[7] Email - ID: _						
[8] Date of Birth	:					
[9] Type of	Faculty (Academician/Faculty from Tecl	nnical Institute/Financial				
	ment Expert/ Government Officer/Rettd. Gove	· · · · · · · · · · · · · · · · · · ·				
Entrepreneur):						
[10] Category: (	SC/ST/PH/Women/OBC/General/Minority):					
[11] Aadhar No.	& PAN Number :					
[12] Area of Spe	cialization (Applicant may specify more than one	e field of specialization)				
Sr. No.	Field of Specialization	Years of Experience				

[14] Educat	tional Qualification		
Sr. No.	Educational Qualification	University/Board	Specialization
[15] Details	s of assignments handled during la	st 5 Years in the area of e	expertise and deta
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**Note:** Please attach relevant documents in support of your application.

## **Important terms and conditions:**

- 1. Director, MSME DI, Indore reserve the right to reject any or all the applications without assigning any reason thereof.
- 2. Director MSME DI, Indore, however, reserves the right to discontinue the panel at any time without assigning any reasons and shall not be liable to pay any compensation on this account.
- 3. Application should be submitted mentioning subject as <u>"Application form for empanelment of guest faculties/resource persons"</u> through post/email.

## **UNDERTAKING**

I do hereby declare that the particulars given above are true to the best of my knowledge & belief. I have read the detailed advertisement, terms and conditions.

*All fields are mandatory.	
Date :	(Signature of the Applicant)