THE INTERNATIONAL CENTRE, GOA

Dr. E. Borges Road, Dona Paula, Goa 403004 (India)
www.internationalcentregoa.com

GALF Internship Programme Application Form

STUDENT DATA			
Prefix		Mr. / Ms. Tick as applicable	
Full Name			
Date of Birth		Date / Month / Year	Age:
Nationality			
Current Address			Pin Code:
Phone		Landline: Area Code + Telephone No.	Mobile: Area Code + Telephone No.
Emergency		Name: Contact Person, in case of emergency	Mobile: Area Code + Telephone No.
Email Address			@ .com
Disabilities / Health Issues		Yes / No	If Yes, explain:
How did you hear about the ICG Internship Programme?			

EDUCATION		
Name of Current College / University / Institute		
Certificate / Degree		Currently Pursuing
Address		Pin Code:
Phone		Landline: Area Code + Telephone No.
Email Address		@ .com

AREAS OF INTEREST			
Programmes		Hospitality	
Marketing		Blogging	
Photography		Social Media	
Policy / Research		Graphic Design	
Travel Arrangement		Report Writing	
Areas of interest in terms of Policy / Research			

COMPUTER LITERACY State proficiency level: Basic / Intermediate / Advanced			
Software / App	Proficiency	Software / App	Proficiency
Windows OS		Android OS	
MS Word		Photoshop / CorelDraw	
MS Excel		Video Editing	
MS PowerPoint		Social Networking: FB/ Twitter / YouTube / Instagram/ Blog	
Internet			
Any other software, if any			

LANGUAGES PROFICIENCY For ability to read / write / speak, state proficiency level: Basic / Intermediate / Advanced			
Languages	Reading	Writing	Speaking
English			
Hindi			
Konkani			
Other: _____			

DECLARATION

All of the information on this form is true and complete to the best of my knowledge. I understand that any false statements made by me on this application or any supplement thereto may be grounds for rejection of my application or dismissal from any subsequent internship assignment.

Applicant's Signature _____ Date _____

Signature from head of institution or recommendation letter _____

PLEASE SUBMIT THIS APPLICATION FORM TO:
Personnel Officer, ICG at personnel@incentgoa.com