

## KERALA POLICE KOZHIKODE RURAL APPLICATION FORM FOR INTERNSHIP PROGRAMME

1	Name of the applicant	II. II
2	Name of the father / guardian	Malleffer
3	Permanent residential address	
4	Address for communication during internship	
5	Mobile No. of the applicant	Mal 6
6	E-mail ID of the applicant	
7	Mobile No. of the parent	A. A. A.
8	Student Identity Card Number	हिंद क्रिं
9	Name and address of the institution	:
10	Course and year of study	:
11	Unit in which internship sought for	:
12	Subjects sought for internship	:
13	Proposed date / duration of internship	:
14	Purpose of internship  DECLA	: ARATION
infor		hereby declare that the above mentioned
information are true and correct to the best of my knowledge and belief.		

## Name and Signature of the applicant with date

## Note:

- Duration of the internship shall be for a maximum of 14 days.
- The recommendation letter from the College Principal, self attested copy of a photo ID Card of the applicant shall be enclosed with the application.
- The applicant will be admitted for the internship subject to the verification report received from the District Special Branch. The duly filled application form shall be submitted to this office 15 days prior to the proposed date of internship.