



## NOMINATION/ APPLICATION FORM

# **Master of Public Health (MPH)**

(August 2023 Session)

# Indian Institute of Public Health - Delhi

(To be filled by the applicant/nominee in capital letters. Please tick in the appropriate boxes)

| First Name:   |                | 1                | Last Name:        |                |          |                  |  |  |
|---|----------------|------------------|-------------------|----------------|----------|------------------|--|--|
| Father's/Husband  |                | Affix a passport |                   |                |          |                  |  |  |
| <b>Gender</b> : Male □  | Fe             |                  |                   |                |          | otograph<br>nere |  |  |
| Age:  | Date of Birth: |                  |                   |                |          |                  |  |  |
| Nationality:  |                |                  |                   |                | <u> </u> |                  |  |  |
| Category: SC □  | ST             | □ c              | BC □ PH □         | GENERAL □      | ews 🗆    | ]                |  |  |
| Applicant Status: Self-sponsored ☐ Nominated ☐                      |                |                  |                   |                |          |                  |  |  |
| If nominated, please give details of nominating organization/dept.: |                |                  |                   |                |          |                  |  |  |
|   |                |                  |                   |                |          |                  |  |  |
| ACADEMIC BACK   | GROUND         |                  |                   |                |          |                  |  |  |
| Level of  | Name of        | Stream /         | Board/University  | College/       | Year of  | Aggregate        |  |  |
| qualification   | the Degree     | -                | Board/Offiversity | Institution    | passing  | Percentage       |  |  |
|   |                |                  |                   | of Affiliation |          |                  |  |  |
| Class X   | N/A            | N/A              |                   |                |          |                  |  |  |
|   |                |                  |                   |                |          |                  |  |  |
| Class XII   | N/A            |                  |                   |                |          |                  |  |  |
|   |                |                  |                   |                |          |                  |  |  |
| Bachelors/  |                |                  |                   |                |          |                  |  |  |
| Undergraduate   |                |                  |                   |                |          |                  |  |  |
| Degree Post graduate/   |                |                  |                   |                |          |                  |  |  |
| Master's or any   |                |                  |                   |                |          |                  |  |  |
| other relevant  |                |                  |                   |                |          |                  |  |  |
| qualification Any other   |                |                  |                   |                |          |                  |  |  |
| qualification /   |                |                  |                   |                |          |                  |  |  |
| Training  |                |                  |                   |                |          |                  |  |  |
| LIST OF RECENT ACADEMIC AWARDS/ ACHIEVEMENTS (if any):              |                |                  |                   |                |          |                  |  |  |
|   |                | -, <del></del> - |                   |                |          |                  |  |  |
|   |                |                  |                   |                |          |                  |  |  |
|   | •••••          |                  |                   |                | •••••    |                  |  |  |

#### **WORK EXPERIENCE**

Total work experience in years: .....

|         | Name of the Organization | Designation | Duration of<br>Employment |
|---------|--------------------------|-------------|---------------------------|
| Current |                          |             |                           |
| Past    |                          |             |                           |
|         |                          |             |                           |
|         |                          |             |                           |

### **ENCLOSURES:**

- i. Transcripts of Class X and Class XII
- ii. Degree certificates and marks sheets of Bachelor/ Under Graduate degree and any other relevant qualifications
- iii. Latest Curriculum Vitae/ Resume
- iv. Contact details of 2 referees (academic/professional)
- v. Caste Certificate (SC/ST/OBC/PH/EWS for General Category)
- vi. **Statement of Purpose** (This needs to be a 250 300 word summary stating professional goals and career plans including plans and expectations in pursuing this program)

## Last date for accepting applications is 30th June, 2023

| APPLICANT'S ADDRESS FOR COMMUNICATION: |            |
|--|------------|
|  |            |
| City:                                  |            |
| State:                                 |            |
| Country:                               |            |
| Pin code:                              |            |
| Phone (Residence): Mobile:             |            |
| Fax: Email:                            |            |
|  |            |
| Date:                                  | Signature: |

## Please post your completed application to:

Manager - Academic Programs

Indian Institute of Public Health- Delhi, 3<sup>rd</sup> Floor, KIIT College of Engineering, KIIT College Campus, Sohna Road-Mumbai Expressway, Bhondsi (Near Maruti Kunj), Gurugram-122102, Haryana | INDIA

Tel:- +91-7042073761, E-mail: acad@phfi.org



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