

## **BHARAT SEVAK SAMAJ FOUNDATION**

(A Govt. Regd. Social Welfare Discipline) Registration No. UP-517/2023 (Govt. of India)

(Mission: Sustainable Development Goals)

Head Office: C-417, Mohan Gali, Nanak Chand Basti, Kotla Mubarakpur, New Delhi-110003 Mobile: +91-9999635723, Email: bharatsevaksamajfoundation@gmail.com

|  | NOMIN   | ATION FORM                          | 1              |                  |
|--|---|-------------------------------------|----------------|------------------|
| Nomination For:  |   | Award                               |                |                  |
| Form to be filled in Block Lett  Applicant's Full Name: Name | ters Only.  The to be filled as it appears on leading to be filled as it appears. | L INFORMATIO  Passport or any other |                |                  |
| Father's Name.   |   |                                     |                |                  |
| Mother's Name.   |   |                                     |                |                  |
| _  | Date of Birth  D D D Place / Country of Birth                                     |                                     |                |                  |
| Phone No   |   | E-Mail Address                      |                |                  |
| Passport No  |   | Country of Issue                    |                |                  |
| Mailing Address.   |   |                                     |                |                  |
| Qualifications   | Institution / School /  |                                     | Specialization | Completion Date  |
|  | ormal studies you have comple<br>n original or certified copy of you              |                                     |                | ertiary studies. |
| Position Held  | Employer<br>  |                                     | Location       | Dates From To    |
|  |   |                                     |                |                  |

copy of your experience letter and / or other supporting documents if necessary to support your nomination..

## AWARD / ACHIEVEMENT / RECOGNITION

| Award  | Awarded By   |  | Date / Place   |
|--|--|--|--|
|  |  |  |  |
| Desired Subject / Topic for the Hor  | norary Doctorate Award:  |  |  |
|  | GENERAL CONDITIO   | NS                                       |  |
| If the BSSF / Member of Board o<br>in a specific area it shall issue a let   | f the $\operatorname{BSSF}$ is satisfied with the experienc ter of intimation. | e, achievements and                      | contributions of an individua                              |
| After the scrutiny of the docur<br>candidate.                                | nents, if the any Board Member feels t   | here shall be an onl                     | ine interview of the                                       |
| ■ The candidate should prepare a and submit to BSSF official add             | short report based on his experience, ac<br>ress or should be send via email.  | hievements and con                       | tribution in the respective field                          |
| In every nomination the decis<br>jurisdiction of Delhi, India.               | ion of BSSF Board shall be final and   | binding. All dispute                     | s shall be subject to the                                  |
|  | DOCUMENT CHECKL  | IST                                      |  |
| Passport / Other Identity Card   | Curriculum Vitae / Brief Profile   | Academic                                 | Qualification Transcript                                   |
| Copy of Award / Recognition  | Experience Cetificates   | Letter of S                              | Support / Recommendation                                   |
|  | APPLICANT DECLARA  | ΓΙΟΝ                                     |  |
| leclare that the information submitt<br>nay be disclosed to the employer org | ntion towards Life Experience  | hat the information stances when such di | contained in this application sclosure is deemed necessary |
| am aware that Doctorate Award (<br>promotion purpose.                        | Honoris Causa) is not an academic de   | egree and cannot be                      | used for a cademic or                                      |
| Date D M M Y   | <u> </u>   |  |  |
| Place  |  |  | Applicant Signature  |
|  | FOR STATE COORDINA   | ATOR                                     |  |
| State Coordinator.   | TORSTATE COORDINA  | ATOR                                     |  |
| Email.   | _  |  |  |
| Date M M Y   | <u> </u>   |  | and /or) Stamp   |
| Place  |  |  | ion and documents provided                                 |