SWAK/117/2024-A1 1/16939/2024

## **State Wetland Authority Kerala (SWAK)**

## **Ecosystem Character Assessment of Selected Wetlands in the State**

## **Application Format for Internship**

ATTACH REQUIRED DOCUMENTS ALONG WITH THE FORM

PLEASE FILL ALL FIELDS IN BLOCK LETTERS

Name:	
Nationality:	
Date of Birth:	_ Male/Female:
Postal Address:	
Contact No:	E-mail ID:
Institution (Name & Address), Course details:	
Name of the Head of the Department/Faculty in Charge:	
Email ID of the Head of the Department/Faculty in Charge:	

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Contact No. of the Head of the Department/Faculty in Charge:	
Preferred Wetland for the internship: (Kadinamkulam - Anchuthengu Kayal / Poovar Pozhikkara / Killi)	
Previous Internship Details (if any):	
Particular Area of Interest & major expectations from the internship programme:	
Date: Signature:	

Head of the Department (Name, Signature and Office Seal)

Forwarded By