Viklang Sahara Samiti Delhi

Head Office: - G-Block, Basti Vikas Kendra, Mangol Puri, New Delhi-110083
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APPLICATION FORM INTERNS	
Name	
Date of birth (DD/MM/YY)	
Male/Female	
Email ID	
Mobile No.	
Telephone No.	
Address	
Name of College/University	
Academic Year (Like 1st Year and 2nd Semester etc.	
Expected Period of Internship (Please give the exact dates)	From: To:
Academic / Professional Referee (the organization may get in touch with the referee before or during the student's internship period)	
Area of Interest (Please note that choice of issues to work on will be flexible)	

How did you learn about VSSD?	
Have you interned with any of our units before? If yes give details	

Please provide a brief essay (500 words) describing your interest in disability work