

U.P. State Legal Services Authority
3rd Floor, Jawahar Bhawan Annexe, Lucknow
Internship Application Form-2016

Name	
Mother's Name	
Father's Name	
Date of Birth	
Name of Institution	
Course	
Year/Semester(Supported by Marksheet/Certificates)	
E-mail address	
Mobile/Phone No.	
Permanent Address	
Local Address with Guardian's Name&Contact Number(s)	
Any Experience of participation in Legal aid/awareness/literacy programme.(Provide details)*	
Other Academics related Extra Curricular Activities*	
Recommending Authority	

Dated:

Place:

Signature of the candidate

***Enclose all documents in support.**