Youth-लिंक
Application Form – Rural Exposure Programme 2015
An initiative of CLEAN-India campaign of Development Alternatives

Individuals between 16-25 years of age are eligible to apply for YIP. For any queries or more information contact: 011-26544100 (pvinod@devalt.org/ cleanindialdelhi@gmail.com)

Get ready to embark on an unforgettable experience!!

Come be a part of our Rural Exposure Programme. Travel with 20 individuals from diverse backgrounds sharing a common interest and get to experience successful sustainable development interventions

For registration download the registration form

Fill the registration form provided below and send us the scanned copy at pvinod@devalt.org/ cleanindialdelhi@gmail.com

Section -1 Personal Detail:

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<th>Salutation</th>
<th>Mr./Ms.</th>
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<tr>
<td>Name</td>
<td>First Name</td>
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<tr>
<td>Date Of Birth</td>
<td>Age</td>
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<tr>
<td>Gender</td>
<td>Male</td>
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Residential Address (Current):

| City: Delhi | Postal Code: |
Residential Address (Permanent):

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<tr>
<th>City</th>
<th>Postal Code</th>
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<th>Your Mobile:</th>
<th>E-mail:</th>
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<th>Landline (with STD code):</th>
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<th>Emergency Contact Number:</th>
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<tr>
<th>Emergency Contact Name/Relation:</th>
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How did you find out about the programme: Facebook/Website/Friend/Youth Forums/Schools-College/Others (please specify)

Section - 2 Extra Curricular Activities:

List any societies, clubs, groups that you have been a part of and your role in those:

What are your hobbies/interests/skills?

Have you ever been for an exposure before? If yes, then where?
Section – 3 Tell us what you think:

Who am I?

What I do well (my strengths):

What could be my areas of improvement (weaknesses), in the context of this exposure

One thing that bothers me:

- About myself:

- in society

What am I looking forward to in the programme........

Section - 4 Fees:

The total cost of exposure for each participant is Rs.9,500/- : Which includes lodging, boarding, resource person and other costs during the programme. It is not inclusive of travel cost from your place of stay to the city of the programme. Participant will bear the cost of travelling to the city of the programme. Fees will not be refunded.
Mode of Payment (Tick Appropriate Box):

Cheque

If Payment needs to be done through Cheque made in the favour of Society for Development Alternatives. (Please put your name, mobile number and ‘YOUTH-लिफ’, behind the Cheque)

Cheque No.:

Name and Branch of Bank Drawn on:

Date:

Section - 5 Medical Information

Do you suffer from any specific medical condition/complications? Please specify and also mention the immediate measures including medicine and dosage to be taken.

Are you on any other regular medication? Please specify the name and the dosage?

Any other relevant information we should know about:

Section - 6 PLEASE READ CAREFULLY BEFORE APPLYING:

- The programme will help you get out of your comfort zone and add to your learning, we expect you to be prepared mentally and physically to tide over any challenges you may face.

- The programme will be accompanied by only the very basic facilities. While this experience will help you get out of your comfort zone and add to your learning, we expect you to be prepared mentally and physically to tide over any challenges you may face. Participants are only allowed to wear kurta-payjama (for boys) and salwar/kurta with dupatta (for girls).

- We also expect you to cooperate fully with the Development Alternatives team in case of any unexpected change in plans or arrangements, in keeping with the objectives of the exposure and your best interests.
• We are concerned about your safety and security and will take the necessary precautions from our end. However, the overall responsibility of your safety rests with you. We cannot be held liable for any injuries, health problems, loss of property or other related issues that you may face during the programme or while traveling to or from organization.

• You will be expected to follow all the rules and regulations of the program that are agreed upon by the team or are communicated to you by Development Alternatives team and the host organization.
I hereby declare that all the above information is true to the best of my knowledge. I have informed my parents/local guardians about the programme and am participating with their consent.

Name of the Participant:

Signature: Date:

Please note that by writing/typing your name above, along with today’s date, we are assuming that you have gone through Section 6 carefully and agree to abide by all the above conditions of the programme.

Please fill out the form and send us the scanned signed copy at pvinod@devalt.org/ cc it to cleanindiadelhi@gmail.com. You can also send the filled forms to the following address marking the envelope with “YOUTH-सिंक 2014”:

Development Alternatives,

World Headquarters, B-32,

TARA Crescent, Qutub Institutional Area,

New Delhi 110016,

India.