

**SCHOOL OF ARCHIVAL STUDIES  
NATIONAL ARCHIVES OF INDIA**

**ADMISSION NOTICE**

***38th short term certificate course in “Archives Management”***

- Duration** : 4<sup>th</sup> February to 15th March 2019
- Objective** : To make the trainees aware of acquisition, arrangement, up-keep and retrieval of records.
- Eligibility** : Graduate in any discipline preferably in humanities from a recognized university
- Reservation** : Seats are reserved for SC /ST/PH & OBC private Candidates as per Government norms.
- Age** : Below 30 years for private candidates  
Below 50 years for sponsored candidates  
(Relaxation in age for the reserved categories is applicable as per Government norms.)
- Registration Fee** : Application alongwith attested copies of educational qualification and Rs.100/- ( Rupees hundred) only through crossed Indian Postal Orders/Bank Draft in favour of Administrative Officer, National Archives of India, Janpath, New Delhi-110001, be sent to The Director General of Archives, National Archives of India, Janpath, New Delhi-110001. Sponsored candidates should apply through proper channel.
- Course Fee** : Rs.300/- (Rupees three hundred) only, Non - Refundable, to be paid at the time of admission.
- Last date of receipt of application** : 11th January 2019
- Boarding & Lodging** : The School has no boarding & lodging facilities.

The prescribed application form may be downloaded from National Archives of India website (nationalarchives.nic.in)

## FORMAT OF APPLICATION

### (38th Certificate course in Archives Management)

1. **Name of Applicant** :
2. **Father's/Husband's Name** :
3. **Age (write Date of Birth also):**
4. **Category** : **General / SC /ST /OBC/PH**
5. **Postal Address & Tel.No. if any** :
6. **Permanent Address** :
7. **Name & address of the sponsoring Department, if employed.** :
8. **Post held at present** :
9. **Details of crossed Indian Postal Order/Demand Draft** :
10. **Academic Qualification (enclose attested copies of testimonials):**

Examination Passed	Subject	Year of passing	Division	Percentage Of Marks	Name of University

**Date :**

**Signature of candidate**

**Signature and Seal of the  
Sponsoring authority  
Fax/ Telephone No.**