



**Centre for Stem Cell and Cancer Genomics  
AM Institute of BioScience**

Coimbatore- 641004

www.amibs.org

Email : [amibioscience@gmail.com](mailto:amibioscience@gmail.com)

Mobile : +91-73391-11990

**Application for Internship**

**Course Opted & Date :**

**Name (Block letters) :**

**DOB & Sex :**

**Degree & Discipline :**

**Institute & Department :**

**Education Qualification :**

Degree	Discipline	College/ University	Year	% of Marks

\*CV and Covering Letter may be enclosed separately

**Contact details**

**Communication address:**

**Mobile No :**

**Email :**

**Net Banking Details**

Transaction ID & Date :

Bank Name :

Branch :

\*Course Fee Rs:-

**\*Note: "Registration fee is non-refundable. Instead, alternative course can be opted"**

I hereby declare the details furnished are true to the best of my knowledge.

Date :

Applicant signature

**For Office Use Only**

Registration Number :

Receipt Number :

Remark if any :

**In Charge**