



National Institute of Plant Health Management

Department of Agriculture & Farmers Welfare
Ministry of Agriculture & Farmers Welfare, Government of India
Rajendranagar, Hyderabad – 500030



TRAINING ON SCIENTIFIC BEEKEEPING

(From 09.09.2025 to 15.09.2025)

Application form

First Name*		
Middle Name		
Last Name		
Name as it should appear on the Certificate*		
Father's Name		
Mother Name		
Sex		
Date of Birth		
Religion		
Category		
Marital status (Single/Married)		
FPOs Name		
Address with Pin code		
State		
Mobile No & Email		
Aadhaar Number		
Educational Qualification		
Experience in bee keeping (if any)		
Any other information		

Signature of the applicant

The filled application may be sent to asovpmniphm-ap@nic.in