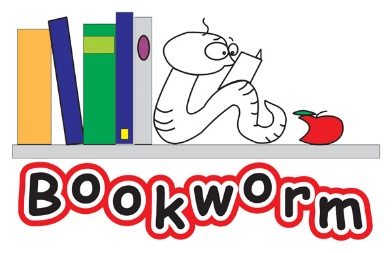
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**Library Educator’s Certificate Course 2019**

**Course Application Form**

Please refer to the course prospectus for all details. For any queries not addressed in the prospectus, write to us at **lec@bookwormgoa.in** or call us on +91-9823222665 (weekdays 10.00 am - 6. 00 pm)

|  |  |
| --- | --- |
| Personal Details | |
| Full Name |  |
| Gender (Retain the option that applies) | F **/** M **/** Others |
| Age (Retain the option that applies) | 20 – 25 **/** 25 – 30 **/** 30 – 40 **/** Above 40 |
| Email address |  |
| Mobile number |  |
| Landline number |  |
| Postal address for correspondence |  |
| Highest Educational and/or Professional Qualification |  |
| Language Strengths  (Retain the option that applies) | **English:**  Reading Writing Speaking  **Hindi:**  Reading Writing Speaking  **Any other (please mention): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Reading Writing Speaking |
| Employment Status  (Retain the option that applies) | Self-employed Volunteer  Un-employed Employed |

|  |  |
| --- | --- |
| Professional Details (If Employed/Volunteer/Self-employed) | |
| Nature of professional engagement? | \_\_\_\_\_\_\_\_\_\_\_\_\_ (Full-time or Part-time) |
| Name of the organisation you are currently associated with |  |
| Nature of the organisation  (Retain the option that applies) | * State Library * Indian NGO * International NGO * Government School / Library * Private School * Private Limited company * Budget / low-cost private school * Independent * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Year of joining the current organization |  |
| Current designation or role |  |
| List your current responsibilities in brief |  |

|  |
| --- |
| Motivation for participation in the LEC |
| **How did you hear about the Library Educators Course?** (Retain the option that applies) |
| Internet **/**Friends**/**Print media**/**Word of mouth**/**Other: \_\_\_\_\_\_\_\_\_\_\_ |
| **Why are you interested in library work?** |
|  |
| **What are your expectations from the LEC?** |
|  |
| **What changes do you expect to bring to your work after LEC?** |
|  |

|  |  |
| --- | --- |
| Requirements for participation | |
| In order to participate in the course fully and most meaningfully, certain minimum proficiency is required in the following skills. Please read each statement and answer with a Yes/No based on an honest self-assessment. | |
| Skill Requirement | Yes/No |
| I have sufficient English language skills to participate in the LEC Contact Sessions and mentor interactions, understand academic readings, write assignments and engage in online discussions |  |
| I have basic typing proficiency and speed required for submitting typed assignments and discussion responses |  |
| I have basic knowledge of MS Word or other word processing applications for submitting assignments and receiving feedback on them |  |
| I have an email account that I access and know how to attach documents to and download attachments from email messages |  |
| I am comfortable using or will learn to use mobile applications such as Whatsapp for interacting with faculty, mentor and course participants |  |
| I know or will learn to use Skype for virtual interactions with the mentor in addition to telephonic conversations |  |
| With some basic orientation, I am willing to learn and use Moodle which the LEC course uses for interaction |  |

|  |  |
| --- | --- |
| Commitment to fulfil course obligations | |
| Please read each statement and answer with a Yes/No. | |
| Commitment to complete the course requirements | Yes/No |
| I am committed to investing in my professional development and put in about 8 hours every week, possibly even over a weekend, over 7 months towards course requirements (including interaction with mentors) |  |
| I am willing to complete and submit the LEC assignments and field-project on time |  |
| I understand that the mentoring relationship is an integral part of the course and will be open to reflecting on mentor’s suggestions and direction. |  |
| I am committed to conceptualising and carrying out a small field-based project at my place of work as part of the course |  |
| I will participate in all two LEC Contact Sessions in April and July 2019 |  |
| I (or my organisation) will bear the expenses to travel to and from the 2 Contact Sessions |  |
| I understand that LEC certification is dependent on fulfilling all the course requirements in a timely manner |  |

**Based on the self-assessment, if you anticipate any factors that may affect your ability to fully participate or complete the course, e.g. access to resources, leave from work, then please list them below.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Scholarships**

**Please fill in this section ONLY if you are applying for a part-scholarship**

The Course offers o a limited number of part-scholarships to enable participation of library practitioners who would not be able to do so without this assistance. Details are as follows:

1. Part-scholarships are available to most deserving candidates determined through a selection process.
2. Irrespective of the receipt of scholarship, all participants will have to bear the travel expenses for Contact Sessions.
3. The scholarship is dependent on satisfactory progress of the participant. Scholarship recipients will be liable to pay the balance course fee if they cannot fulfil the course requirements satisfactorily.

**Personal Statement for Scholarship**

Please present a personal statement presenting the reasons why you should receive the scholarship, focusing on the following aspects: ***(Max. 500 words)***

* How would you and your organisation benefit from your participation in the LEC?
* What is the current status of your financial need
* How will you contribute to the Library work in the education sector after completion of this course?

**Financial Details - Only for independent applicants**

1) Your annual income (average of the last two years)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Financial Details – Only for applicants sponsored or supported by their organisations**

1. Your annual income at this organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Organisation’s strength (# of staff): (Retain the option that applies)

Less than 10 **/** Between 11 to 25 **/** More than 25

1. Organisational expenditure in the last year is: (Retain the option that applies)

Less than 20 lakh **/** Between 21 and 50 lakh **/** More than 50 lakh

1. List 3 major funders in the last two years

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other financial details to be filled in by ALL scholarship applicants**

1. What percentage of the course fee would **you/your organisation be able to pay**?

25% **/** 50% **/** 75%

1. Would you be able and willing to participate if your scholarship application is not accepted? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Yes or No)*

**Participant Declaration**

**By submitting this form, I affirm that I understand and am committed to fulfilling the requisite course requirements and that all the information furnished above is true to best of my knowledge.**

Full Name:

Date:

Place:

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**Organisational Consent & Declaration of Commitment\***

**I consent to Mr. / Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ participating in LEC 2019 for his/her professional development. The organisational leadership understands the course-requirements and expected involvement from participants. The organisation agrees to support the applicant’s participation in the course by way of the following**

* Allowing the participant a major portion of the 8-hour requirement every week from his/her professional work hours towards meaningful engagement with the course
* Providing the time and resources for travelling to and participation in LEC Contact Sessions
* Offering access to computer and internet resources and basic IT support at work
* Ensuring close engagement with organisation’s library work during the course and for at least 1-2 years after the course. This also involves access to project sites for carrying out a field-project during the course.

(If the applicant has applied for part-scholarship)

I have checked the information provided in this application form for correctness.

Name of the organisation:

Name of the concerned authority from whom consent has been received:

Designation of this person in the organisation:

*\*Not applicable to independent applicants*