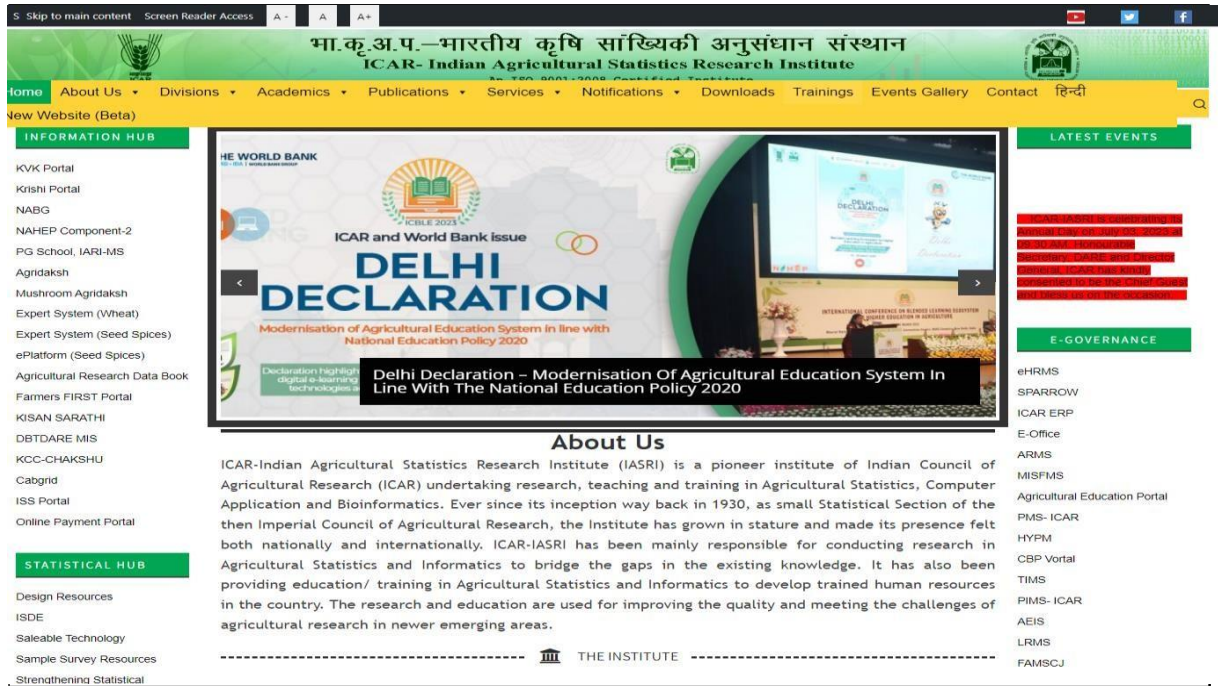




# **ICAR-IASRI**

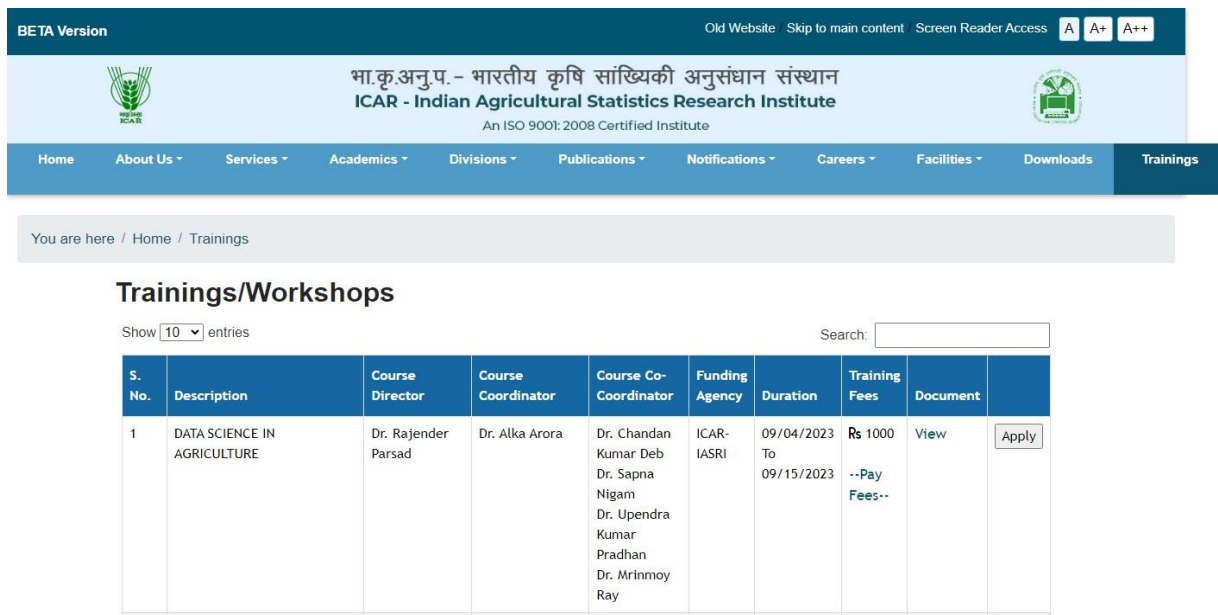
## **Training's Reference**

### **Manual**



**Fig. 1.1. Trainings**



- Go to IASRI Website and click on “Trainings”, and the user will be redirected to the Training Page as shown in Fig. 1.2.



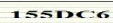
**Fig. 1.2. Trainings Page**

- In this page, the user has to click on “Apply” button and the user will be redirected on the Login Page as shown in Fig. 1.3.


BETA Version    Old Website    Skip to main content    Screen Reader Access    A    A+    A++


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### Trainee Login

 Enter Captcha code  
       

---

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HELP	VIGILANCE OFFICER	ICAR		Contact Number: 91-11- 25847121-24, 25841254	
RTI	CGHS MEDICAL SERVICESR	CALENDAR		Total Visitors : Since 4th July, 2017	

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**Fig. 1.3. Login Page**

- The user who have already registered can directly login by entering the Username and Password.
- If a user is new on this trainee page, the user can click on the “New Registration” and can register on the page.



[Back](#)

## Create Your Account

Fields mentioned with \* sign are mandatory.  
If you are already registered, No need to create your account again.

### Institute Info

Institute \* **Select any of the SAU's/ICAR's \***

### Personal Info

Name \*

Date of Birth \*

Enter User ID\*(User ID should be an Email ID)

Enter Password\*

Confirm Your Password\*

Mobile Number\*

Phone Number\*

Fax

Gender\*

Marital Status\*

Alternate Email Address

### Other Info

Designation\*

Discipline\*

Official Address\*



[Create Account](#)

**Fig.1.4. New Registration Page**

- The user has to fill the complete form if the user is new to the training page.
- The user has to fill all the details like Name, Date of Birth, Gender, Marital Status, Designation etc.
- After registering the user can login by using the Username and Password and the user will be redirected to the next page as shown in Fig. 1.5.



Upload Copy of Signed Application (Pending)

Bank Details (Pending)

Logout

## Application Form for Participation in "DATA SCIENCE IN AGRICULTURE"

**Training Title** DATA SCIENCE IN AGRICULTURE

**Course Director Name** Dr. Rajender Parsad

**Course Coordinator Name** Dr. Alka Arora

**Course Co-Coordinator's Name** Dr. Chandan Kumar Deb  
Dr. Sapna Nigam  
Dr. Upendra Kumar Pradhan  
Dr. Mrinmoy Ray

**Training Duration** 09/04/2023 to 09/15/2023

**Participant Name (in block letters)** MR. SHIVAM SINGH

**Designation** Assistant Professor

**Institute Name** Srm (SRR), Meerut

**E-mail** SHIVAMCS579@GMAIL.COM

**Parmanent address** B10

**Date of birth** 01 Jan 1900

**Sex** Male

**Marital status** Married

**Mention if you have participated in any research seminar, Summer / Winter / Short Courses etc. during last five (5) year under I.C.A.R. / Other Organizations**

### Qualification \*

Degree	Discipline	Year	Class/Grade	University/Institution
Ph.D.				
M.Sc				
B.Sc				
Others				

### Transaction Date

01-01-1900

### Transaction Id.

Upload the Payment Receipt: (only pdf less than 4mb)

Choose File No file chosen

[Transaction Receipt](#)

### Recommendations of forwarding Institute\*

Signature:

Designation:

Address:

Date:

Certificate: It is certified that the information was furnished by the office record and was found corrected.

Please take print out of advance copy. After recommendation of Director/Head of organisation, Upload the final approved application. Candidate will be considered after uploading of final approved copy.

Save

Print

Next

**Fig. 1.5. Application Form**

- The user has to fill the Application Form by filling all the details regarding Qualifications, Transaction Date, Transaction Id and also upload the Payment Receipt for the same.
- All the other details will be prefilled from the new user registration page.
- After filling the details, the user has to click on "Save" button and then take the print of the form to get it signed by their respective Director/Head.

**Note:** For payment regarding the training, kindly go to the link: <https://pgiasri.icar.gov.in/payment.aspx>.

**Note:** After filling all the details the user has to take the print of the form and get it signed by their respective Director/Head and has to upload the scanned copy of the signed form by clicking on "Next" as shown in Fig,1.6.

**Note: Before uploading the form the user can save the form and can make changes if required.**

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Back Logout

**Note: Mandatory for the Applicant**  
Upload the duly signed copy of the application form.

Upload the signed application form:  
Choose File No file chosen

Upload

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**Fig. 1.6. Uploading Final Form**

- On this page the user has to upload the signed form copy filled on the previous page as shown in Fig. 1.5.
- After attaching the document, the user has to click on “Upload” and a message that “Your application has been submitted” will appear.
- After uploading, the user will also get a confirmation mail regarding the submission of the application.

**Note: The document to be uploaded should be in PDF format only and size should not be more than 4MB.**

**Note: After uploading the form the user cannot make any changes in the form.**

**Note: For any query please mail on [cbp@icar.gov.in](mailto:cbp@icar.gov.in).**