



11. Technical/ other qualifications/courses etc., :

| Sl. No. | Examination passed with group | Subjects | Board / University | Period        |             | Percentage | Division/ Grade |
|---------|-------------------------------|----------|--------------------|---------------|-------------|------------|-----------------|
|         |                               |          |                    | From dd-mm-yy | To dd-mm-yy |            |                 |
|         |                               |          |                    |               |             |            |                 |
|         |                               |          |                    |               |             |            |                 |

12. Experience (with Organization name and period of experience) :

| Sl. No. | Name of the post/ position | Institute/ Centre | Subject area | Period        |             | Total Years/ Months/ Days |
|---------|----------------------------|-------------------|--------------|---------------|-------------|---------------------------|
|         |                            |                   |              | From dd-mm-yy | To dd-mm-yy |                           |
|         |                            |                   |              |               |             |                           |
|         |                            |                   |              |               |             |                           |
|         |                            |                   |              |               |             |                           |
|         |                            |                   |              |               |             |                           |
|         |                            |                   |              |               |             |                           |

13. Details of family members working in ICMR/ Govt/ PSU etc.,

| Sl. No. | Name of the relative & relationship | Designation | Name of the organization working presently | Permanent/ Temporary | Period        |             |
|---------|-------------------------------------|-------------|--|----------------------|---------------|-------------|
|         |                                     |             |  |                      | From dd-mm-yy | To dd-mm-yy |
|         |                                     |             |  |                      |               |             |
|         |                                     |             |  |                      |               |             |
|         |                                     |             |  |                      |               |             |

14. Languages known :

a. To speak : \_\_\_\_\_

b. To write : \_\_\_\_\_

c. To read : \_\_\_\_\_

15. Additional information, if any:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### DECLARATION

I, hereby declare that the information furnished in the application is true, complete and correct to the best of my knowledge and belief. I fully aware that in the event of any of the said information furnished by me being found false or incorrect at any stage, my candidature/ appointment is liable to be summarily cancelled / terminated without any notice or compensation.

Place : \_\_\_\_\_

Signature of the Candidate : \_\_\_\_\_

Date : \_\_\_\_\_

Name (In block letters) : \_\_\_\_\_