

11. Technical/ other qualifications/courses/NET/GATE 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) : _