APPLICATION FORM

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Advt. No	••••••	
Application for the Post of	f:	
Name of Project:		
Category:	GEN SC ST OBC	
1. Name of the Applicant (in	CAPITAL words):	
2. Sex: Male	Female Others	
3. Marital Status:	Married Unmarried Divorced/ Widow	
4. Father's Name		
5. Name of the Spouse :		
(5		
7. Age as on last date of recodate of walk –in Interview		
8. Present Address for Communications	i	
	i,	
	Mobile No.:	
	Email:	
9. Permanent Address:		
ŧ	PIN	
	Telephone No.	

Examination	Subjects	Boar	d/ Council/University	%/ Division	
X th (HSC)					
XII th (HSSC)					-
Diploma (please mention duration one year/two years)					
Degree					
Post Graduation					
Others (M.Phil/Ph.D)					
12. Current Activities:					

Mobile No. :

Name of the	Status of Organization (Central/State/ Autonomous/ PSU)	Name of the Post held	Whether permanent /contractual	Period		Scale of	
Organization/ Institution where worked and Place				From	То	Pay & Gross Pay Drawn	Nature of Work
				-			
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Use separate sheet if	space is in	ndequa	ate)			l		1	
4. Knowledge of co				, please attach	certificate	e/diploma	/degree:		
5. Details of publication	ations with	imna	et factor a	nd authorship	details, if	any:			
5. Details of publica									
	64	· Cowo	og vyoll knov	wn with the ar	onlicant's v	work :			
16. Name and addre	ess of two r						hone No. &		
Name			Occupation	n or Position	Address with telephone No. & e-mail				
1.									
2.									
17. Any other inf	formation	you v	wish to ado	d:					
18. Check List: (——————————————————————————————————————	k in	the box giv	ven below as	proof of	enclosure	es.)		
All Certificate	es must be	attes	sted and b	e attached in	tne iono	wing or o	ici .		
(i) Certificate in									
(ii) Degree/Diplo	oma				*************				

	(iii) Experience Certificate
1.1.1	(iv) Caste certificate (If any)
	(v) Documents relating to retrenched Govt.Employees/Departmental
	DECLARATION
	I,
	Place:
	Date: (Signature of the applicant Full Name