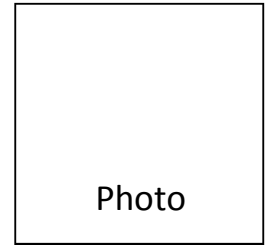


ICMR- NATIONAL INSTITUTE OF PATHOLOGY
SAFDARJUNG HOSPITAL CAMPUS,
NEW DELHI- 110029



1. Name of the Project : Application of new tools for Molecular diagnosis and surveillance of post kala-azar dermal leishmaniasis (PKDL) and cutaneous leishmaniasis in India.”
2. Applying for the Post of :
3. Name of the Candidate :
(In Block Letters)
4. Father’s Name :
5. Date of birth / : _____ / _____ Yrs. Age in completed years
6. Sex : Male / Female
7. Category : SC / ST / OBC / Others
(enclose certificate to avail relaxation)
8. Permanent Address : _____

9. Present Address : _____

10. Mobile Number :
E-mail ID :
11. Educational Qualification
a) Essential Qualifications (Certificates in support of qualifications must be attached).

Sl. No	Exam passed	Year of passing	Board /University	% of Marks

b) Desirable Qualifications

Sl. No	Exam passed	Year of passing	Board /University	% of Marks

Work Experience

(Certificates in support of experience must be attached).

Sl No	Name of the Employer (Name of the office/Institution)	Period (Date/month/year)		Post held
		From	To	

Note: Additional information, if any can be provided on a separate sheet.

12. List of Publications, Patents and Awards (if any)

(a) Details of Publications

S. No.	Manuscript Reference	Citation	Impact Factor as per Clarivate Analytics (Thomson Reuters)	NAAS Score	Any other Indexing

(b) Awards (if any)

13. If selected what period would you require for joining the post:

Declaration: I hereby declare that the particulars furnished in this form are true to the best of my knowledge and belief. Furnishing false information or suppressing facts will be a disqualification and is likely to render the candidate unfit.

Date:

Signature:

Place:

Name of Candidate:

Note: The scanned copy of the filled-in application form along with all the supporting documents should be mailed to E-mail id- molbio.nip@gmail.com in a single PDF.