ICMR-NATIONAL INSTITUTE OF MEDICAL STATISTICS Ansari Nagar, New Delhi 110029

Name of the Project	National Data Qual	ity Forum (NDQF)
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Applicat	ion F	ormat
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Post applied for	

1.	Name (In Block Letters)		
2.	Father's/Spouse's Name		
3.	Date of Birth:		
4.	Present Age (as on 17-7-2020) Years Months Days		
5.	Sex:	Male / Female	
6.	Category (Enclose proof	GEN/SC/ST/OBC/PH of caste certificate issued by the comp	etent authority)
7.	Address		
8.	Mobile Number		
9.	E-mail ID		

10. Educational Qualifications (matriculation onwards)

Sl. No.	Examination passed	Board /University	Year of	Subject Studied	% of
			passing		Marks
			1		

11.	Experience (in chronological	order starting from	the present employer)
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Sl. No.	Name of the Employer	Nature of Duties	Date of	Date of
			Joining	Leaving

- 12. List of publications
- 13. List of papers presented at conferences
- 14. List of monographs/project report completed

DECLARATION

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any of the information provided by me are found false or incorrect at any stage, my candidature/appointment shall be liable for cancellation/termination without notice or any compensation in lieu thereof.

Place:	Signature of the Candidate	
Date:		