

APPLICATION FORM

APPLICANT'S NAME

AGE

GENDER

EMAIL ID

PERMANENT ADDRESS

.....

.....

CONTACT NO- 1)

2)

YEAR OF PASSING

1) Graduation

2) Post Graduation

COURSE NAME

1) Graduation

Aggregate Percentage

.....

2) Post Graduation.....

Specialty

Aggregate Percentage

EXPERIENCE:

NUMBER OF PUBLICATIONS:

AWARDS:

The Envelope should have appropriate mentioned of "Application for the post of Research Officer for NOHP Project"

All application must be emailed to aiimscder@gmail.com on or before.....

NOTE: The resume must comply the format else liable for rejection

Please Affix
Recent Photograph

AYIRAHARAN, 10/10/2020
10/10/2020
10/10/2020