APPLICATION FORM

	APPLICATION FORM	SIZE SIGNED
Advert	isement No. :	PHOTOGRAPH
Name	of the project:	
Name	e of the Post:	
Intervi	ew choice mode (In-person or online video conferencing) :	-
1.	Name of the Candidates (Block letters):	
2.	Father's/Husband Name:	
3.	Sex : Male/Female	
4.	Date of Birth (Please attach documentary proof):	
5.	Age as on 31-08-2020 :Year	
6.	Marital Status:	
7.	Permanent address:	
8.	Correspondence address	
9.	E-mail Id : WhatsApp No):

10. Whether SC/ST/OBC/GEN (Documentary evidence to be attached)

11. Nationality:....

Educational Qualification/Technical Qualification:- (Please attach photocopy of related certificates) starting 12. from Matriculation/10th& onwards:

S. No.	Name of the Examination Passed	Subjects	Name of Board / University	Year of Passing	% of Marks / GP/ Division

13. Experience (particulars of all previous and present employment) if any:- (Please attach documentary proof)

Sr.No.	Name of the Organization	Post/ position held	Period	Emoluments	Remarks	

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AFFEX RECENT PASSPORT

14. Detail of Publications:15. Any other Information:

DECLARATION:

I hereby declare that all the statements made above are true, completer and correct to the best of my knowledge and belief. I also declare that (i) I have never been punished or debarred from government (Central/State) autonomous Organizations and ICAR service; (ii) I have not been convicted by a court of law for any offence. In the event of any information being found false/ incorrect/ ineligibility being detected at any time before or after selection, action may be taken against me and I shall be bound by the decision of the employer. I further declare that I have read the Advt. carefully and I declare that I fulfill all the conditions of eligibility regarding age limit, educational qualifications etc., prescribed for the contractual engagement.

Date: Place: Signature of the applicant: Name: