CSIR-CENTRAL GLASS & CERAMIC RESEARCH INSTITUTE

196, Raja S. C. Mallick Road, Kolkata – 700 032. website: www.cgcri.res.in

APPLICATION FORM

To The Director, CSIR-CGCRI, Kolkata-700032.

Recent copy of passport size photograph

| Sul | Subject: Application for the position of: (JRF, PA etc.): | | | | | | | | | | | |
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| Ref | Ref: Advt. No. GC/R&A/: | | | | | | | | | | | |
| <u> </u> | | | | , , | | | | | | | | |
| 1. | Name (in block letter): | | | | | | | | | | | |
| 2. | Father's Name: | | | | | | | | | | | |
| 3 | Date of Birth: | | 4. | 4. Age as on date of advertisement: | | | Y | Y | M | M | D | D |
| 5. | Sex: | | 6. | Marital Status: | | | 7. | Caste | | | | |
| 8. | Address (Block Letters) | : | | | 1 | | | . | | I. | | |
| | | | | | | | | | | | | |
| 9. | Mobile No.: | | | | E-mail: | | | | | | | |
| | | | | | | | | | | | | |
| 10. | 10. Qualification (Begin from Class X) | | | | | | | | | | | |
| Examination Passed Year Board/University % of marks * Specialization | | | | | | | | | | | | |

NET/GATE, if yes Valid upto Rank

*CGPA/DGPA Conversion to Percentage must be supported with self-attested copy of University/Institute Rules.

11. Whether Registered/Awarded for Ph.D., if yes, please give details:

| Name of University | Year of Registration | Year of PhD Award | | |
|--------------------|----------------------|-------------------|--|--|
| | | | | |

12. Experience, if any, please attach supporting document.

| nization Position/F | Post Held From | To | Total Tenure (Year/Month/Days) |
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- 13. Do you have any publication in any SCI/Non-SCI Journal (If yes, mention the number):
- 14. Are you presently engaged in Research Work either in CSIR-CGCRI or any other CSIR Labs/Inst.? If yes, please submit NOC from your present Project Leader/Guide:
- 15. Have you ever lived in abroad for more than 1 year? If yes mention the country and tenure:

DECLARATION

I solemnly declare that (a) all statements made in this application are true, complete and correct to the best of my knowledge and belief and in the event of any information being found false my candidature will be liable to be cancelled, (b) I agree to take this interview/test through MS Teams or through any other online means as per government approved norms, and (c) I agree to take this interview/test at my own risk subject to verification of my eligibility and if subsequently CSIR-CGCRI finds me ineligible for interview/test, the Director, CSIR-CGCRI may cancel my candidature even after finalization of results.

| Signature: |
|------------|
| Signatu |

Data-Sheet

(to be submitted in MS-excel format only)

| Advt. No. | Name of the candidate | Date of Birth | E-mail | Mobile No. | |
|-----------|-----------------------|---------------|--------|------------|--|
| | | DD/MM/YYYY | | | |