## APPLICATION FORMAT

Name of the Po	ost	Item No.			
1. Name of the (In Capital		::			
2. Father's / H	usband Name	:	•		
3. Sex		:: 1	Male/ Female		AFFIX RECENT PASSPORT SIZE SIGNED
4. Date of birt (Document evi	h dence to be attached)	::			PHOTOGRAPH
5. Age as on C Advertiseme		::			
6. Marital Statu	ıs	::			
7. Corresponde (with Contact N	nce Address Vo. & E-mail ID)	::			
. Permanent A	ddress	:: E	mail:		
. Whether SC/	ST/OBC/GEN lence to be attached)	::			
. Nationality		::			
1. Educational C	Qualification ::				
Name of the Exam	Name of Board/ University	Class/ Division	Percentage	Year of Passing	Subject
1.	2.	3.	4.	5.	6.

			Nature of employment (Temp./Adhoc/ Contractual)	Date of Joining	Date of Leaving
•	2	3	4.	5.	6.

I hereby declare that all the statements made above are true, complete 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.

Place:	
Date:	Signature of the candidate
	Name: