

9. Email id

(IN CAPITAL LETTERS)

Centre for Materials for Electronics Technology (C-MET), Hyderabad

Advt. No: HD/02/Rectt/1/SP-49/2024

Affix Latest
Passport Size
Photograph
Duly Signed

Engagement of Project Personnel

1. Position applied for : 2. Name in full (in BLOCK letters) : 3. Father's/Mother's/Husband's Name : 4. Date of Birth (Proof to be enclosed): 5. Age as on closing date : 6. Nationality : 7. Address (a) Permanent : (b) For communication : 8. Telephone & Mobile No. :		APPLICATION FORM	
3. Father's/Mother's/Husband's Name : 4. Date of Birth (Proof to be enclosed): 5. Age as on closing date : 6. Nationality : 7. Address (a) Permanent : (b) For communication :	1.	Position applied for :	
4. Date of Birth (Proof to be enclosed): 5. Age as on closing date : 6. Nationality : 7. Address (a) Permanent : (b) For communication :	2.	Name in full (in BLOCK letters) :	
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7. Address (a) Permanent :	5.	Age as on closing date :	
(a) Permanent :	6.	Nationality :	
(b) For communication :	7.	Address	
		(a) Permanent :	
8. Telephone & Mobile No. :		(b) For communication :	
	8.	Telephone & Mobile No. :	

10. Whether belongs to GEN/SC/ST/OBC(NCL)/PWD: (**Proof to be enclosed**, /strike out whichever is not applicable)

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If so, provide & nature of rel Educational Qu (in chronologic needed.	Name and det ationship: ualifications cal order starti	ails of the Emp : ng with 10 th /I	oloyee, Lab wl	s) - Use extra s	sheet, if		
Exam Passed	Year of Passing	University / Board	Subject	Marks	Percentage of Marks		
, .	•	R-UGC Joint ex	am/GATE ?				
i) N	ame of the ex	am passed	:				
ii) D	ate of exam p	assed	:				
iii) NET/CSIR-UGC Joint exam/GATE :							
Q	ualified certific	cate No.					
Name of the	-			Detailed natu			
Organization / Company/ firm	Held	From	То	performed (l shee	•		
* Use senara	te sheet duly :	authenticated l	ov vour signati	ura			
•	•			uic			
Documents att	ached in supp	ort of experien	ce (Please tick	in appropriate	box):		
(a) Appoii	ntment Letter						
(b) Experi	ence Certificat	te					
(c) Latest	/Last Pay slip						
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	If so, provide & nature of rel Educational Qu (in chronologic needed. Exam Passed Have you pass (If 'yes' plessi) N ii) N iii) N Quantity Pathology Details of Examployment Name of the Organization / Company/firm * Use separation / Company/firm * Use separation / Company/firm pathology Separation / Company/firm / Company	If so, provide Name and det & nature of relationship: Educational Qualifications (in chronological order startineeded. Exam Passed Year of Passing Have you passed NET/CSIR (If 'yes' please indicate) i) Name of the example iii) NET/CSIR-UGC Qualified certification Details of Experience; if employment) (starting with Name of the Organization Held Name of the Post/Position Held * Use separate sheet duly a (PI. attach self attested copponents attached in supponents attached	If so, provide Name and details of the Emile Nature of relationship: Educational Qualifications: (in chronological order starting with 10 th /Ineeded. Exam Passed Year of University / Passing Board Have you passed NET/CSIR-UGC Joint exam (If 'yes' please indicate) i) Name of the exam passed iii) Date of exam passed iii) NET/CSIR-UGC Joint exam/GA Qualified certificate No. Details of Experience; if any (particular employment) (starting with the most received many firm Name of the Organization / Company/ firm * Use separate sheet duly authenticated if (PI. attach self attested copies of certifical Documents attached in support of experience (a) Appointment Letter (b) Experience Certificate	& nature of relationship: Educational Qualifications (in chronological order starting with 10 th /Matric onwards needed. Exam Passed Year of Passing Board Subject Have you passed NET/CSIR-UGC Joint exam/GATE? (If 'yes' please indicate) i) Name of the exam passed: iii) Date of exam passed: iii) NET/CSIR-UGC Joint exam/GATE: Qualified certificate No. Details of Experience; if any (particulars of all pemployment) (starting with the most recent) - Use sepant of the Organization o	If so, provide Name and details of the Employee, Lab where he/she is 8 nature of relationship: Educational Qualifications: (in chronological order starting with 10 th /Matric onwards) - Use extra sneeded. Exam Passed Year of Passing Board Marks Have you passed NET/CSIR-UGC Joint exam/GATE? (If 'yes' please indicate) i) Name of the exam passed : ii) Date of exam passed : iii) NET/CSIR-UGC Joint exam/GATE : Qualified certificate No. Details of Experience; if any (particulars of all previous and employment) (starting with the most recent) - Use separate sheet, if no organization Held From To Detailed nate (Pl. attach self attested copies of certificates) Documents attached in support of experience (Please tick in appropriate (a) Appointment Letter (b) Experience Certificate (c) Latest/Last Pay slip		

4	6.	Pres	ont	Doc	itio	
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- a. If you are studying, please mention course/subject details.
- b. Details of fellowship/post
- c. Name of the institution/organization in which you are studying/working.
- **17.** Whether qualifications/experience prescribed for the position applied for are satisfied (if any of the qualification secured by you is considered equivalent to the prescribed, indicate authority thereon):

	the prescribed, indicate authority thereon):					
18.	References (two references) (Must be indicated clearly)					
	1.		2			
		Mobile No.	Mobile No	o:		
		E-mail id:	E-mail id	1:		
19.	Any	y other information you may like to indicate:				
20.	List of Enclosures					
Sr No		Details				

DECLARATION

I hereby declare that I have carefully read and fully understood all the instructions and details pertaining to the position being applied by me and all statements made and information furnished in this application are true and complete to the best of my knowledge and belief.

I also fully understand that at any stage it is discovered that an attempt has been made by me to willfully conceal or misrepresent the facts, my candidature may summarily be rejected or my employment terminated. I have gone through the important instructions of the advertisement and agree for it.

Place	:	
Date	:	Signature of the candidate