

## Annexure-I

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1. Name of the Applicant (In Block Letters) :
2. Father/ Husband's Name :
3. Weather belongs to SC/ ST/ OBC/ General :
4. Date of Birth (DD/MM/YYYY) :
5. Age on 30th April 2021 :
6. Sex (Male / Female/Transgender) :
7. Present Address (with pin code) :  
a. for Correspondence :

b. Permanent address :

8. E-mail ID and Mobile Numbers :

9. Details of Educational Qualification :  
(in chronological order, starting from 10th Class onwards including additional degree/  
diploma

[illegible]

10. Details of Working/ Professional Experience (if any):  
(particulars of all previous and present employment, list for which proof is available, enclose attested copies of experience)

S.N.	Position Held	Employer	Period		Total Experience (in months)
			From	To	

11. Are you an employee elsewhere? (If Yes, provide the details and NOC from employer):
13. List of Research Papers, Professional Achievements and Additional Information (if any):
14. Are you having Near/ Distant Relative(s) working at ICAR/ CMFRI? (If Yes, must declare it (Annexure-II) and communicate it before the interview date. If communicated or declared on the date of interview, candidate will not be interviewed. If candidates having No Near/ Distant Relative(s) working at ICAR/ CMFRI will also furnish a declaration in the format given in Annexure-II on the date of interview)
15. Self-declaration regarding truthfulness in application:

### **DECLARATION**

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false/ incorrect/ incomplete or ineligibility being detected at any time before or after interview/ selection, my candidature/ appointment may be cancelled or is liable to be rejected without any notice.

Date and Place: .....

Signature.....

Full Name of the Candidate.....

**DECLARATION**

(To be submitted in advance by candidates whose relative(s) is an employee of ICAR/CMFRI; other candidates will furnish it at the time of interview)

I ....., declare that none of my near or distant relative(s) is an employee of the Indian Council of Agricultural research (ICAR) / Central Marine Fisheries Research Institute (CMFRI), Kochi, India.

OR

I ....., declare that I am related to the following individual(s) employed in ICAR/ CMFRI, Kochi, whose name(s), designation, nature of duties and relationship with me is furnished below:

Name:

Designation:

Institute/Organization:

Nature of duties:

In the event of the above-cited information is found to be incorrect or concealing any facts, my candidature to the interview/ selection to the post is liable to be cancelled.

Date and Place:.....

Signature.....

Full Name of the Candidate.....