

APPLICATION FORM FOR JUNIOR RESEARCH FELLOWSHIP IN CEPTAM

(To be filled by the candidate in his/her own handwriting)

Name of post Applied (with subject), _____, Advertisement No.- CEPTAM/JRF/2024/01

01	Full Name in Block Letters										
02	(i) Father's Name		Please affix a recent passport size photograph								
	(ii) Mother's Name										
	(iii) Spouse Name (if applicable)										
3(a)	Gender : Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender <input type="checkbox"/>	3(b) Category : GEN <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> EWS <input type="checkbox"/>									
3(c)	Date of Birth : <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table> (DDMMYY)	D	D	M	M	Y	Y	3(d) Age: yrs months (as on crucial/closing date)			
D	D	M	M	Y	Y						
04	Correspondence Address: (in Block Letters)			Pincode	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
05	Permanent Address: (in Block Letters)			Pincode	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
06	Contact Details: Phone(with STD code) : _____ Mobile: +91- _____ Alternate No. if any: _____										
07	E-mail ID: _____ Alternate Email ID: _____										
08	Educational Qualifications (From Matric/10th/SSC onwards, Self-attested copies to be enclosed):										
	Examination Passed	Subject (s)	Board or University	Month & Year of Passing	Division/ Class/Grade	Percentage (%) / CGPA					
09	Experience (if any) Note: Attach sheets if required										
	Name of Post /Designation	Name of the Organization/Dept.	Period of Service		Job Description (In brief)						
			From	To							
10	Whether Qualified NET/GATE Examination: YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, give details (proof to be enclosed) Enrolment/Roll No.: _____ Year: _____ Score : _____										
11	Have you ever been interviewed in DRDO, YES <input type="checkbox"/> NO <input type="checkbox"/> if so, give details: _____										
12	Have you ever been debarred for recruitment examination by any Govt. agency YES <input type="checkbox"/> NO <input type="checkbox"/> if so, give details: _____										
13	DECLARATION: I hereby declare that, the above furnished particulars are correct to the best of my knowledge and no information is suppressed. If at any time, I am found to have concealed/distorted any information, my fellowship shall be liable for summarly termination without any prior notice. I am ready, to take up and discharge the duties assigned to me anywhere in India, as and when required.										
Place: _____		For Office Use Only									
Date : _____		S.No. _____									
		Signature _____			Signature of the Candidate						