Application Form

1.	Full Nam	e (In Block l	letters)					Г	
2.	Father's N	Name							
3.		Date of Birth (DD/MM/YY)							Attested
4.		date of Inte							Passport s
5.	Address with pin code {a. Permanent address and b. For communication}								photogra
6.	Mobile N	0.							
7.		E-mail Address							
8.	Sex	301 000							
9.	Marital st	atus							
10.	Whether		ongs (Attach	to proof)					
						,	copies of certifica	ĺ	
Degree		Board/University		Year passing	of g	Maximum marks	Marks obtained	Percenta	ge
12 D	etails of Ext	perience (inc	·lude exr	nerience of	one vear	and above only, at	tach the proof)		
S. No		1		Employe		Period (from)	Period (to)	Total experience	ce
14. No 15. Ao	o objection odditional inf	lications (or certificate fr formation, if on regarding	om prese any	ent employ	/er	s with proof)			
					DECLA	RATION			
						s an employee of th	. I. P C		

Date & Place

Declaration

Iin Genetics D	ivision. The fo	llowing par				
of the advertisement for a	ttending the int	erview:				
Name	:					
Designation	:					
Nature of duties :						
Relationship	:					
Date & Place						
					S	Signature

Full name of the Candidate