Annexure-I

Post applied for: Young Professional II

Matriculationonwards including additional de	gree/ diploma)	
10. Details of Educational Qualification:(in chrono	ological order, starting fro	m
9. Contact Mobile Number		
8. E-mail Address		
7. Category (SC/ST/OBC-Non Creamy Layer/		
b. Permanent Address		
a. For Correspondence		
6. Present Address (with Pin Code)		
5. Sex (Male/Female/Transgender):		
of application YearsMonths	Days	
4. Age on closing date of receipt		
(As per Matriculation Certificate)		Here
3. Date of Birth (DD/MM/YYYY)		photograph here
(In Block Letters)		passport size
2. Father/Husband's Name		recent
(In Block Letters)		Paste your
1. Name of the Candidate		

S.N.	Exam/Class/ Degree/Diploma	Board/Institution/ University	Year of Passing	Subject	%Marks/ OGPA/ Division
1.	Matriculation				
2.	Intermediate				
3.	Graduation				
4.	Post Graduation				
5.	Diploma/Ph.D./M.Phil				

11. Details of Working/Professional Experience (if any):

(Particulars of all previous and present employment, list for which proof is available, please enclose attested copies of experience)

S.N.	Post Held	Employer	From - To	Total Experience (in months)	Nature of work done.

- 12. Are you an employee else where?(If Yes, provide the details and NOC from employer):
- 13. Are you having near/ Distant Relative(s) working at ICAR-IARI, New Delhi (If yes, please submit necessary declaration in the attached format (Annexure-II) along with your application. Candidates having no near/ Distant Relative(s) working at ICAR-IARI, New Delhi are also required to furnish a declaration in the same format given in Annexure-II) along with their application).
- 14. 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 anytimebefore or after interview/selection, my candidature/appointment may be cancelled or is liable to be rejected without any notice.

Date	Signature	
Place		
	Full Name of the Candidate	

Annexure-II

DECLARATION

(To be submitted by each candidate(s), along with their application, failing which their Interview will not be held, even if qualified to attend it)

I, dec	clare that none of my near or distant relative(s)
is an employee of the Indian Council of Agri	cultural research (ICAR)/ Indian Agricultural
Research Institute (IARI), New Delhi, India.	
Or	
Idec	clare that I am related to the following
individual(s) employed in ICAR/IARI, New Dell	ni, 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 fou candidature for the interview/ selection to the pos	
Date Place	Signature
	Full Name of the Candidate

Annexure - III

I , Sh./ Ms./ Smt	S/o,
D/o, W/o Sh. /Smt	

will comply with the Official Secrets Acts, 1923 as amended from time to time and will not disclose any information / data acquired by me during my engagement to any unauthorized person (s). I will not, except with the prior sanction / approval of Competent Authority in the ICAR/ICAR, New Delhi, or in the bona fide discharge of my duties, publish a book or a compilation of articles or participate in media broadcast or contribute an article or write a letter to any newspaper(s) or periodical(s) either in my own name or anonymously or pseudonymously in the name of any other person if such book, article, broadcast or letter relates to subject matter pertaining to official business of ICAR.

Signature
Name
Address
Mobile
Email