E-mail: chesc.iihr@icar.gov.in Phone: 7892882351



भारतीय बागवानी अनुसंघान संस्थान (भा. कृ. अ. प.) केन्द्रीय बागवानी परीक्षण केन्द्र

चेड्डवी - 571248, कोड्गु, (कर्नाटक)



ICAR-INDIAN INSTITUTE OF HORTICULTURAL RESEARCH CENTRAL HORTICULTURAL EXPERIMENT STATION

Chettalli- 571 248, Kodagu, Karnataka

ADVT. NO. 01/2025/CHES-C

APPLICATION FORMAT

Item Mo:/Sl.No:								
APP	LICATION FOR THE POST	OF:						
	Name of the Candidate (In capital letters)	::					AFFIV DECI	CNIT
2. l	Father's /Husband's name	::					AFFIX RECI PASSPORT	
3.	Sex	::	Male /	Female			PHOTOGRA	łРН
	Date of Birth (Documentary evidence to be	:: attached)						
	Age as on Closing date of Advertisement	::						
6. l	Marital Status							
	Correspondence Address with (Contact No. & email address							
8. l	Permanent Address							
	Whether SC/ ST/OBC (Documentary evidence to be	:: attached)						
10.	10. Nationality							
11.	Educational Qualification	s ::						
	ne of the Name of Board	-	ass/	Percentage	Year of		Subjects	•
	<u>xam. University</u>		<u>ision</u>		passing		<u>taken</u>	•
1	2	3	<u>i</u>	4	5		6	

12. Whether NET Qualified

(Attested certificate if YES)

:: Yes / NO

13. Whether Pursuing PhD (If Yes which University)

:: Yes / NO

14. Details of Experience (if employed: attach documentary support compulsorily):

Name of the Employer	Designation	Pay scale & salary Drawn per	Nature of employment Temp./Q.P./Permanent	Date of joining	Date of leaving
1	2.	3	4	5	6

- 1. List of Publications (in a referred journals only; attach only first page of the publication):
 - a. NAAS rating above 6.00
 - A. As a first author
 - B. As a subsequent author
 - b. NAAS rating below 6.00
 - A. As a first author
 - B. As a subsequent author

I hereby declare that all the statements made above are true, complete and correct to the best of my knowledge and belief. I also declare the (i). I have never been punished or debarred from government (central/state) autonomous Organizations and ICAR service (ii). I have not been convicted by a court of law for any offence. In the event of any information being found false/incorrect/ineligibility being detected at any time before or after the Examination/Interview, action may be taken against me and I shall be bound by the decision of the employer. I further declare that I have read the Advt. Carefully and I declare that I fulfil all the conditions of eligibility regarding age limit, educational qualifications etc., prescribed for the post.

Date:

Signature of the candidate

*Application not signed by the candidate will be rejected

NOTE: Candidates who can join duty within 15 Days of the date of issue of appointment order only need to apply.

NO OBJECTION CERTIFICATE (For those who are working	z in the ICAR-IIHR only	۱

This	is	to	certify	that	Mr/Mrs/Dr	is	presently	engaged	as
			unc	der the	Project / Scheme				_ a
this Institute. / her.		I hav	re 'No (Objection" for forwarding the applica	tion f	or the post a	applied by l	him	

Name of the PI

Signature with date

Name of the Project

Check list for the application to be sent:

- 1. Application form.
- SSLC marks card/ Date of birth certificate proof.
 SC/ST/OBC certificate if any.
- 4. Degree certificates and Marks cards.
- 5. First page of the publications if any.
- **A** Candidates already pursuing Ph.D. need not apply for the posts advertised.