# FORMAT OF APPLICATION ICAR-INDIAN INSTITUTE OF OILSEEDS RESEARCH RAJENDRANAGAR, HYDERABAD-5000 30

Affix Photograph

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## APPLICATION FOR THE POST OF : YOUNG PROFESSIONAL- I (Section\_\_\_\_\_\_

1.	Name in full (In Block lette	ers)			
2.	Father's/Husband's Name	9			
3.	Nationality				
4.	Date of Birth				
5.	Age(as on closing date for	submission of			
	application)				
6.	Sex (Male/Female)				
7.	Present Address				
8.	Corresponding postal add	ress with			
	Mobile Number				
9.	Whether belongs to SC/S				
9.	Serviceman (If yes, state r				
	enclosed attested copy of				
	certificate from a Gazette				
10.	Educational Qualifications				
SI.N		University/Board	Year of	Grade/Division	Subjects
	Examination		passing	& % of marks	
			P	in aggregate	
				00 0	

11. Details of Experience, if any (Particulars of all previous and present employment)

SI.No.	Organization	Post held	Period		Scale of pay/Consoli dated pay	Nature of duties performed
			From	То		

(PTO)

#### **12.** Any other relevant information:

I hereby declare that all the particulars furnished above 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 or incorrect/incomplete or ineligibility being detected at any time before or after interview/selection, my candidature is liable rejected. I shall be bound by the decision of the Director, ICAR-IIOR, Hyderabad.

Signature of the Candidate

Date:

# FORMAT OF APPLICATION ICAR-INDIAN INSTITUTE OF OILSEEDS RESEARCH RAJENDRANAGAR, HYDERABAD-5000 30

Affix Photograph

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### APPLICATION FOR THE POST OF : YOUNG PROFESSIONAL- II (Section\_\_\_\_\_

1.	Na	me in full (In Block lette	ers)			
2.	Father's/Husband's Name					
3.	Nationality					
4.	Da	te of Birth				
5.	-	e(as on closing date for	submission of			
		plication)				
6.		x (Male/Female)				
7.	Pr	esent Address				
	_					
8.		rresponding postal add	ress with			
	IVI	obile Number				
0	14/	hother holenge to SC/S				
9.	Whether belongs to SC/ST/OBC/PH/Ex-					
	Serviceman (If yes, state name of Caste & enclosed attested copy of the caste					
	certificate from a Gazetted Officer)					
10.						
SI.N				Year of	Grade/Division	Subjects
		Examination	••••••••••••••••••••••••••••••••••••••	passing	& % of marks	
					in aggregate	
					00 0	

11. Details of Experience, if any (Particulars of all previous and present employment)

SI.No.	Organization	Post held	Period		Scale of pay/Consoli dated pay	Nature of duties performed
			From	То		

(PTO)

#### **12.** Any other relevant information:

I hereby declare that all the particulars furnished above 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 or incorrect/incomplete or ineligibility being detected at any time before or after interview/selection, my candidature is liable rejected. I shall be bound by the decision of the Director, ICAR-IIOR, Hyderabad.

Signature of the Candidate

Date: