

For Office Use Only
Application No. – P69 / /

CSIR - INSTITUTE OF MINERALS & MATERIALS TECHNOLOGY

BHUBANESWAR - 751013

Advertisement No – PME/P69/2024

APPLICATION FORM

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1. Post Code Applying for: _____.
2. Project Number Applying for: _____.
3. Name of the Position Applying for: _____.
(In Capital Letters)
4. Do you possess Essential Qualification for the Post Applying for (Yes/No): _____.
5. Candidates Name: _____.
(In Capital Letters as per the Matriculation / High School Certificate)
6. Father's Name: _____.
7. Mother's Name: _____.
8. Date of Birth (DD/MM/YYYY): _____.
9. Age as on last date of submission of application: ____ Years ____ Months ____ Days.
10. Gender: _____.
11. Category (SC/ST/OBC/GEN/PWD): _____.
12. Nationality: _____.
13. Correspondence Address:
At: _____
Post: _____, City/PS: _____
District: _____, State/UT: _____
PIN: _____, Tel. No. /Mobile No: _____
E – Mail ID: _____
14. Permanent Address:
At: _____,

Post: _____, City/PS: _____

District: _____, State/UT: _____

PIN: _____, Tel. No/Mobile No: _____

E – Mail ID: _____

15. Details of Educational Qualification:

(a)

Examination Passed	Name of Board/ University	Year of Passing	Certificate Serial No	Aggregate percentage of Marks	Major Subjects
10 th					
12 th					
Diploma					
B.Sc.					
B.E./ B. Tech.					
M.Sc.					
M.E./ M. Tech.					
M.Phil.					
Any Other					

(b) (i) Whether awarded for Ph.D.? (Yes/No): _____.

If yes, please submit the following details.

Institute/ University	Year of Passing	Certificate Serial No	Subject

(ii) Ph.D. Title: _____

_____ .

16. Whether qualified in NET or GATE or selected through a selection process through national level examinations conducted by Central Government Departments and their agencies and institutions? (Yes/No): _____.

If yes, please submit the following details.

Examination Passed	Name of the examination conducting agency/ institution	Year of Passing	Roll No/ Registration Number	Score	Rank	Valid upto	Subject

17. Details of Experience:

Name of the Organization/ Institution	Designation	Salary	Date of Joining	Date of Leaving	Nature of work done

18. Details of publications:

Sl. No.	Title	Author Name	Journal Name	SCI
1.				
2.				
3.				

19. Are you presently engaged as project personnel either in CSIR- IMMT or any other CSIR Labs/Institute/Organization? (Yes/No): _____.
20. Whether related to any serving employees of CSIR / CSIR-IMMT? (Yes / No): _____

If yes, please submit the following details of the employee.

Name of the Institution	
Name of the Employee	
Relation Type	
Designation / Position	
Division / Department	
Place of Posting	

DECLARATION

- I have read the advertisement and all the terms and informations/conditions mentioned therein and hereby undertake to abide by them. I further declare that I fulfil all the conditions of eligibility regarding age limits, essential qualifications etc. prescribed in the recruitment advertisement.
- I 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 that in the event of any information being found suppressed / false or incorrect at any stage or ineligibility being detected before or after the recruitment, my candidature/appointment is liable to be cancelled.

Date: _____

(Full Signature with date)

Place: _____

(Name: _____)