



INSTITUTE OF NANO SCIENCE & TECHNOLOGY
(An Autonomous Research Institute of Department of Science and Technology,
Government of India)
Knowledge City, Sector 81, SAS Nagar, Mohali- 140306, Punjab

APPLICATION FORM FOR PROJECT RESEARCH SCIENTIST-II (NON-MEDICAL)

(Please fill the form in BLOCK CAPITAL LETTERS only)

For Office use
Application No:
Date of Receipt:

Affix latest
Passport size color
Photograph here

1. Post Applied for: _____

2. Name of the Applicant Mr./Ms. _____
(In block CAPITAL letters)

3. Father's/Mother's: _____

4. Gender: _____ 5. Date of Birth: _____ Age _____ Y _____ M _____ D

6. Marital Status: _____ 7. Spouse's Name _____

8. Do you belong to GEN/ SC/ ST/ OBC/ PH category* _____

*(Please enclose self-attested copy of the certificate, if applicable)

9. Present Mailing Address

State: _____	Pin _____	code: _____
Telephone and _____	Mobile _____	No. _____
_____ E-mail ID: _____		

10. Permanent Address

State: _____	Pin _____	code: _____
Telephone and _____	Mobile _____	No. _____
_____ E-mail ID: _____		

11. Details of academic record [in chronological order from highest up to matriculation]

(Self-Attested copies of the mark sheets/certificates to be enclosed)

Sr. No.	Degree/ Exam (with discipline)	University / College / Board	Year of Passing	Percentage of Marks / CPI	Class/Grade/ Rank	Subjects Taken

12. Test Score Details (Please provide details of UGC/CSIR NET/GATE/Other examinations)

(Please enclose duly self-attested copies)

Test	Registrati on	Score		Rank	Qualifying Year/Month
		Percentage	Percentile		

13. Employment Record/ Research Experience: (including Post doctoral) [Details in chronological order, starting with present employment up to the first employment] (Self-Attested copies to be enclosed)

Sr. No.	Organization (also specify whether Govt./PSU or Autonomous body or /Private)	Post Held (Also specify whether regular or contractual)	Scale of pay/ Pay Band and Grade Pay	Duration (Exact dates to be given)		Total period (in years)	Nature of duties

14. Total Experience in years as on (): _

15. Brief Details of Research Experience:

16. A complete List of Publications indicating Impact Factor must be attached in a separate sheet. Alongwith this sheet, copies of front-page of each publication be enclosed.

DECLARATION

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If, at any time, I am found to have concealed/distorted any material information, my candidature shall be rejected and/ or my appointment as Postdoctoral Fellow shall be liable to be summarily terminated without any notice/compensation.

Dated:

Signature

Place:

Name: _____