



Application Format for the post of on contract basis vide - Advt. No. C-02/2023

Fathe Date o Comn Religi	of Birth (DD-M	:					Affix		
Date o Comn Religi	of Birth (DD-M						A ffiv		
Comn Religi	-		Father's Name :						
Religi		Date of Birth (DD-MM-YY) :							
_	Community (SC/ST/OBC/EWS/Gen) :								
Whet	Religion :								
	ther belong to M	linority :Yes ,	/ No						
Last/	Present Organi	zation :							
	(Please tick)	Govt. (Central/State) P	PSU Auto. B	odies Others	3			
	Corres	pondence Address		Permanent A	ddress				
State_		Pin		Ctata	Pin				
E-Mai	act Number wit il Address	:h STD Code :			_				
E-Mai Quali	act Number wit il Address	ch STD Code :	Nam		_	Max. marks	%age o		
E-Mai Quali	act Number wit il Address fications (Acado	ch STD Code : : emic & Professional): Year of	Nam	ne of the Inst./	- Marks	Max.	%age o		
E-Mai Quali	act Number wit il Address fications (Acado	ch STD Code : : emic & Professional): Year of	Nam	ne of the Inst./	- Marks	Max.	%age o		
E-Mai Quali	act Number wit il Address fications (Acado	ch STD Code : : emic & Professional): Year of	Nam	ne of the Inst./	- Marks	Max.	%age o		
E-Mai Quali	act Number wit il Address fications (Acado	ch STD Code : : emic & Professional): Year of	Nam	ne of the Inst./	- Marks	Max.	%age o		
E-Mai	act Number wit il Address fications (Acado xam Passed	ch STD Code : : emic & Professional): Year of	Nam	ne of the Inst./	- Marks	Max.	%age o		

Doot hold with	Name of the		PERIOD		
Post held with scale of pay or gross emoluments	Employer (Give the name of Organisation/ Company)	From Date DD/MM/YY	To Date DD/MM/YY	Total Duration (in Yrs. & Months)	Name of the Project(s) on which worked and nature of experience
Total Experience	ce = Years _	Month	s	_ Days	
				Signatur	e of the Candidate