APPLICATION FORM

	<u>APPLICATION FORM</u>	Photograph
Adver	(passport size)	
Name	of the project:	
Name		
Post co	ode:	
Interv	iew choice mode (In-person or online video conferencing) :	
If onli	ine video conferencing then provide Skype Id/Account:	
••••••		
1.	Name of the Candidates (Block letters):	
2.	Father's/Husband Name:	
3.	Sex : Male/Female/ Transgender	
4.	Date of Birth (Please attach documentary proof):	
5.	Age as on 21-10-2020 :	
6.	Marital Status:	
7.	Permanent address:	
8.	Correspondence address.	
9.	E-mail Id:	
10.	Whether SC/ST/OBC/GEN (Documentary evidence to be attached)	
11.	Nationality:	
12.	Educational Qualification/Technical Qualification: (Please attach photocopy of related p provisional certificates) starting from Matriculation/10 th onwards:	eass certificates/

S. No.	Name of the Examination Passed	Subjects	Name of Board / University	Year of Passing	% of Marks / GP/ Division

Note: If any other qualification like CSIR NET/LS, ARS NET, GATE etc. please mention.

13. Experience (particulars of all previous and present employment) if any:- (Please attach documentary proof)

Sr.No.	Name of the Organization	Post/ position held	Period	Emoluments	Remarks	

14. Detail of Publications:	
15. No Objection Certificate from present employer (if employed)	
16. Any other Information:	
	Il the information given above are correct
to the best of my knowledge and belief.	
Place :	
Date :	
Note: Add extra sheets, if the space provided is not enough.	Signature of candidate