matriculation onwards duly attested affixing a passport size photograph on the top. The selected candidate will be required to produce medical certificate at the time of joining.

• In case of any disputes, it will be resolved in the jurisdiction of New Delhi court only.

Name of the Project:



APPLICATION FORM

Pos	st applied for:	
1.	Full Name (In Block	
	letters)	
2.	Father's/Husband's	
	name	
3.	Date of Birth	
	(DD/MM/YY)	
4.	Age as on date of	
	advertisement	
5.	Permanent address with	
	Pin Code	
6.	Address for	
	correspondence (If	
	different from	
	permanent address)	
7.	Mobile Number	
8.	E-mail Address	
9.	Sex	
10.	Marital Status	
11.	Whether belongs to	
	SC/ST/OBC/General	

12. Details of educational qualification from 10th onwards

Degree	Discipline/	Board/	Institute/	Year of	Duration	Marks
	Subject	University	College	passing	of course	(Percentage)
10 th						

12 th						
B.Sc.						
M.Sc						
Ph.D.(if applicable	e)					
NET/GATE etc qualified?(if applicable)						
13. Experience						
S. No. Post/Position held Employer			Period	Wo	rks done/	

S. No.	Post/Position held	Employer	Period	Works done/
			(From-To)	experience

14. Whe	ether obtained	NOC from	present	employer,	if employed?
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- 15. Details of publications (only published research papers):
- 16. Additional Relevant Information if any:

Declaration

The information given above by me is true to the best of my knowledge and belief. If any information is found false, my candidature and services if selected may be terminated without any notice.

Date:	Signature of Candidat
Date.	Signature of Candida

Name:...