राष्ट्रीय विज्ञान संग्रहालय परिषद National Council of Science Museums ब्लॉक-जी एन, सेक्टर-v, बिधान नगर Block – GN, Sector – V, Bidhan Nagar

कोलकाता/Kolkata-700091

Photo to be affixed

APPLICATION FOR THE POSITION OF.....

1.	Name (in CAPITAL letters)	
2.	Father's Name	
3.	(i) Present Residential Address	
	(ii) Permanent Address	
4.	(i) Date of Birth (DD/MM/YYYY) (ii) Age as on 30.04.2025	
5.	E-mail ID	
6.	(i) Aadhar Number	
	(ii) PAN	
7.	Contact Number [Mobile & Landline (if any)]	
	 (i) Whether worked in Govt. service/private job/freelance? Date of Entry into Govt. Service (if any) (ii) If Govt. service, whether Central Govt. or State Govt. or CPSU/SPSU or Autonomous Body Date of Retirement 	
10.	Educational Qualifications*	

		experience with Nature of				
		work performed				
		(Starting from last				
		, ,				
	1.0	employment)*				
	12.	Additional Information, if				
		any, in support of your				
		suitability for the post*				
		_				
	*plea	ase attach separate sheet, if re	equired.			
			\			
Declaration: I (Name) hereby						
declare that information provided in this application are true to the						
best of my knowledge and belief. In case the information provided by						
n	ne is f	ound to be false or the material	facts are concealed by me at any			
	stage i.e. during processing of my application or even after my joining					
	_		ouncil, my candidature will be			
	cancelled and my engagement may be terminated, without assigning					
any reason thereof.						
a	ury rea	ason thereor.				
The supporting documents are attached herewith as Annexure.						
1	ine sc	ipporting documents are attac	lieu lierewith as Alliexure.			
_						
L	Date Candidate's signature					
F	Place _	Name of the	ne candidate in CAPITAL LETTER			

11. Brief particulars of