

Annexure-I

Advt.07/2025-REC

Application for Engagement of Assistant Medical Officer/Medical Officer in CSIR-NEIST Dispensary

1.	Name in full (Block Letter)		Attested photograph to be pasted			
2.	Father's/ Mother's Name					
3.	Date of Birth					
4.	Date of Superannuation from Govt. Service					
5.	PPO No.(Enclose Xerox Copy)					
6.	Complete residential Address with phone number/Mobile No.					
7.	Office address at the time of retirement					
8.	E-mail id					
9.	Phone/Mobile No.					
10.	Aadhaar No.					
11.	Educational Qualification					
12.	Brief particulars of experience in Govt. Service during last five years, just before retirement	Post	From	To	Pay Level (7 th CPC)	Name and address of employer/institution

13.	Additional relevant information, if any, in support of your suitability for the said engagement (Attach a separate sheet, if necessary)	
14.	Name of two references preferably from the organization in which worked along with Address and contact number	

Undertaking/Declaration: - I hereby declare that all the statements & information made in the application are correct and complete to the best of my knowledge & belief and nothing has been concealed/distorted. I further declare that I was clear from vigilance angle at the time of my retirement and I am medically fit to perform office work. In the event of any statements & information being found false or incorrect at any time, action may be taken against me and I shall abide by the decision of authority, my engagement shall be liable to be summarily terminated without notice/compensation.

(Signature of Candidate)

Name.....

Place.....

Date.....