

**APPLICATION FOR THE POST OF PERSONAL ASSISTANT ON DEPUTATION /
BASIS AT ICAR-NATIONAL INSTITUTE OF ANIMAL NUTRITION AND
PHYSIOLOGY, ADUGODI, BENGALURU – 560 030.**

1. Name of the candidate (in block letters)
2. Name of the Institute where presently working
3. Date of appointment on regular basis in the present post
4. Date of joining into ICAR / Institute and designation
5. Present Basic Pay and Grade Pay
6. Whether permanent / temporary
7. Date of Birth / Present Age
8. Educational qualifications
9. Whether SC / ST / OBC
10. Details of service including present post

Name of the Institute	Post held	Scale of pay	Period		Nature of duties performed
			From	To	

11. Any other information relevant to the service of the applicant:

Declaration

I do hereby declare and certify that all the information furnished by me is correct to the best of my knowledge and belief. In the event of any information found false or incorrect at any time before or after the selection, action may be taken against me and I shall abide by the decision of the Director, ICAR-NIANP, Bengaluru.

Signature of the Candidate

Certificate to be furnished by the Head of Department / Officer

Certified that the information furnished by the candidate has been verified from the Office / Service records and found correct.

Date:
Place:

Counter signature of the Head
of Office/Controlling Officer