



**भाकृअनुप - राष्ट्रीय अजैविक स्ट्रेस प्रबंधन संस्थान**  
**ICAR - NATIONAL INSTITUTE OF ABIOTIC STRESS MANAGEMENT**  
 (समतुल्य विश्वविद्यालय) / (Deemed to be University)  
 भारतीय कृषि अनुसंधान परिषद, कृषि अनुसंधान एवं शिक्षा विभाग  
**Indian Council of Agricultural Research, Department of Agricultural Research & Education**  
 कृषि एवं किसान कल्याण मंत्रालय, भारत सरकार  
**MINISTRY OF AGRICULTURE & FARMERS WELFARE, GOVERNMENT OF INDIA**  
 मालेगांव, बारामती, पुणे - 413 115, महाराष्ट्र, भारत  
**Malegaon, Baramati- 413115, Pune, Maharashtra, India**



Annexure- I

**Format for submission of application**

Serial number of SRF Post applied for \_\_\_\_\_

1.	Name of the candidate (in block letters)	:		<b>Attested passport size photograph</b>		
2.	Father's/Husband's name (in block letters)	:				
3.	Date of Birth (as per the matriculation)	:				
4.	Age as on 01.12.2021	:				
5.	Address for correspondence	:				
6.	Permanent address	:				
7.	Contact Telephone Number	:				
	Mobile No (Compulsory)	:				
	E-mail ID (Compulsory)	:				
	Fax Number (if any)	:				
8.	Category (SC/ST/OBC/GEN)	:				
9.	Gender	:				
10.	Whether Handicapped (please mention type and extent)	:				
11.	Marital status	:				
12.	Educational Qualifications (You are required to enclose attested copies of the mark sheets/ certificates):					
	Sr. no.	Degree obtained	Institution / University	Subject/s	Year Passed	% Marks obtained
	i.	Matriculation				
	ii.	Intermediate				
	iii.	Diploma				
	iv.	Graduation				
	v	Post- graduation				



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	vi	PhD				
	vii	Any other				
13.	Work experience – Minimum one-year relevant experience will be desirable (Please enclose relevant proof / NOC from employer)		:			

I hereby declare that the information furnished in this application are true/ correct to the best of my knowledge and belief. If selected, I promise to abide by the rules and discipline of the Institute. I note that the decision of the competent authority shall be final in regard to the selection. In the event of any information being found false or incorrect, my candidature/ appointment may be cancelled without any notice and necessary action, as deemed fit may be initiated against me.

Place:  
Date:

(Signature of Candidate)  
Name: \_\_\_\_\_

**DECLARATION**

I hereby declare that **none of my near or distant relative is an employee of the Indian Council of Agricultural Research (ICAR) –National Institute of Abiotic Stress Management.** If found otherwise and in the event of non-declaring the same as prescribed in the advertisement, my candidature to the interview and my selection to the post be cancelled.

**Date:**

**Place:**

**Signature**

**Full name of the Candidate**

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**OR**

The following particular of my relative(s) working in ICAR is/are furnished as per the requirement of the advertisement for attending the interview:

Name :

Designation :

Nature of duties :

Relationship :

**Date:**

**Place:**

**Signature**

**Full name of the Candidate**

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