

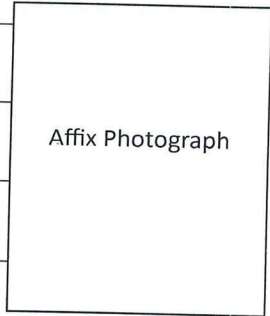
**ORAL HEALTH SCIENCES CENTRE
POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH, CHANDIGARH**

Application form for the post of Project Research Scientist – I(Non–Medical)

Application form for the post of Project Technical Support -III

Application form for the post of Project Technical Support -I

1. Name of the Applicant _____
2. Father's Name _____
3. Date of Birth _____
4. Gender : M/F _____
5. Educational Qualifications :



S. No.	Academic/ Professional Qualification and Subject	Name of Institution	Board/University	Year of passing out	Division/ Grade/% of marks.

6. Experience :

S. No.	Designation	Name of Institution/Employer	From	To

7. Research/projects undertaken:

8. Training/Short course attended:

9. Award and Achievements (if any):

10. Statement of Purpose: (100 words maximum)

11. Contact Details :

- a) Mailing Address _____
- b) Permanent Address _____
- c) Telephone Number(Res)_____ (Mob)_____
- d) Email-ID _____

12. Documents to be enclosed : Self attested (Please Tick)

- a) Degree/Diploma/Certificate ()
- b) Experience Certificates ()
- c) Age Proof ()
- d) List of Publications () (**Attach list in Vancouver style of referencing**)
- e) Any Other ()

13. Undertaking :

I hereby certify that all the information given above is true to the best of my knowledge. If any of the above information is found to be incorrect at any stage, I shall be liable to be disqualified/terminated from the service.

Date : _____

Place : _____

Signature of the Applicant