## Annexure-I

Name	e of the Post Applied for :				Affix Recent passport size Colour photograph
1.	Name of the candidate (in Eletters):	Block			
2.	Address for communication	1:			
	Contact No.:				
	Email ID:				
3.	Permanent Address:				
	Contact No.:				
	Email ID:				
4.	Identity proof submitted, wi	th details:			
5.	Eligibility criteria/documen	ts submitted	l:		
Sl. No.	Eligibility criteria		Details	Documents attached (Yes/No)	Verification (Office purpose only)
i.	a) Date of Birth	a)			
	b) Age (as on last date)	b)	years; months;		

			day	rs;					
Sl. No.	Educational qualifications		Name of the University/ Institute.	Year of Passing.	CGPA/ OGPA/ Percentage obtained.	Documents attached (Yes/No)	Verification (Office purpose only)		
6.		T	/experience(if any):						
Sl. No.	Area of Experience/ Training	Experi  Position held (Employee/ Trainee)	ence details  Name of the Institution.	From To	Period  - Completed Years & Months.	Documents attached (Yes/No)	Verification (Office purpose only)		

**Declaration**I hereby declare that I have read the notification for selection of Technical Analyst (Chemistry/ Microbiology) and the details given above and the supporting documents submitted are true & valid to the best of my knowledge.

Place:	Signature :
Date:	Name:

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