Application for the selection of Young Professionals on contract basis

					Affix recessize photo	ent passport ograph
1	Name of the position for	(on contract) applied	Young Pr	ofessional		
2	Full Name (In block l	etters)				
3	Gender		Male Female Transgender			
4	Father's/Husband's N	ame				
5	Date of Birth (as on the notification) (DD/MM					
6	Contact details		Mobile No /Tel No			
			Email ID			
7	Address for communi	cation				
			Pin code			
8	Permanent Address		Tr. 1			
0 51:	•1 •1•.	. 1 1	Pin code			
9. Elig	ibility criteria/docume	nts submitted.				
Sl No.	Eligibility/Criteria	Details			Document is attached (Yes/No)	Verification (Office purpose only)
1.	a) Date of birth b) Age (not more than 35 years as on	a) b)				

2.	Educational Qualifications	Name of the University/ Institution	Class obtained with % of marks	
3.				

10. Details of experience

Sl. No.	Area of Experience	Experience details		Period			Verificatio
		Positions held (Employee)	Name of the institution	From -To	Completed Years & months	s attached (Yes/No)	n(Office purpose only)
1							
2							

Declaration

I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I understand and agree that in the event of any information given above found false or incorrect/incomplete or ineligibility being detected at any time before or after the selection/test/interview, my candidature is liable to be rejected and I shall be bound by the decision of the Spices Board. I have read all the terms and conditions above and I am ready to accept all the terms and conditions for engagement of Young Professional.

Place:	Signature :
Date:	Name: