

APPLICATION FORM FOR THE CONTRACTUAL POSITION AT WILDLIFE INSTITUTE OF INDIA, DEHRADUN

Recent passport size colour photograph of the candidate

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	Personal	Intorm	ation.
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a	Post applied for a	nd/or Serial	
	Number, project	name, advertisement	
	No.		
b	Name of the appl	icant	
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c	Current designati	on	
d	Caste (SC/ST/O	BC)	
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f	Father's/Husband	l's Name	
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h	Contact details	Communication	
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2. Educational qualifications (from Bachelor's Degree onwards). <u>Attach self-attested copies of mark sheets and degree certificates:</u>

Degree/Diploma	Name of the Institution/ University	Passing year	rear Grade**/ % of marl		Main Subjects			
**Please provide grade equivalence to the percentage of marks, if any.								

3.	Details	of e	xperience	in	relevant	fields	(Attach	self	-attested	copies	of o	experience	letter/c	ertificate):

Sl. No.	Name of Institute/	Designation	Period		Monthly Emoluments drawn
	Organization/ Department		From	То	Emoluments drawn

4. a) Details of Publications (please attach separate sheet if needed):

Category	Number
(1) Peer-reviewed Journal Articles	
(2) Technical/ Research Reports	
(3) Books/ Book Chapters/ Manuals	
(4) Others	

4. b) Details of Projects/work experience (please attach separate sheet if needed):

Sl. No.	Projects	Nature of duties (Roles and responsibilities held by the applicant)

- 5. Candidate passed UGC/CSIR/ICAR NET should provide details.
- 6. Professional/ Academic Referees (optional):

(Please provide the name, affiliation, designation, and contact details of 1-2 Referees)

- 7. Candidate(s) presently working with any of the Government Organization/NGO/Project must ensure to attach a copy of the "No Objection Certificate" from their concerned employer/PI of the project, as the case may be.
- 8. Any other relevant information (optional)
- 9. Have you applied on any other WII project or offered any other position? If so, provide details

DECLARATION BY THE APPLICANT

I declare that all the particulars stated in the application and enclosures are accurate to the best of my knowledge and belief.

	(Signature of Applicant)
Place:	
Date:	
List of attachment(s):	
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