

**Annexure A**  
**APPLICATION FORM**

- 1 Name of the Post Applied for:
- 2 Name of the Candidate (in BLOCK LETTERS):
- 3 Gender:
- 4 Date of Birth (DD/MM/YYYY):
- 5 Father's Name:
- 6 Mother's Name:
- 7 Marital Status (Married/Unmarried):
- 8 Present Address for Correspondence:
- 9 Permanent Address:
- 10 Phone Number / Mobile Number:
- 11 Email ID:
- 12 Educational Qualifications

Sr. No.	Degree	% of Marks/CGPA	Year of Passing	Board/University

**13** Details of Experience

Sr. No.	Designation	Institute/Employer Name	Period (From–To)	Reason for Leaving

**14** Research Projects (If Any):

**15** Research Skills/Techniques:

**16** Publications (Top 5, if any):

**17** Have you ever been declared unfit by a medical board/court for appointment in any government service? (Yes/No):

If yes, give details:

**18** If selected, within what period would you require for joining the post?

**Declaration**

I hereby declare that the information given above is true and correct to the best of my knowledge. In the event of any information being found false/incorrect at any stage, my candidacy/services are liable to be terminated without notice.

Place:

Date:

**(Signature of the Candidate)**

**(Name in Block Letters)**

### **Checklist for Documents to Attach**

1. Date of Birth Proof
2. Educational Certificates
3. Experience Certificates
4. Address Proof
5. Proof/First Page of Publications claimed
6. Any Other Relevant Certificates