

Application Form for Data Entry Operator for ICMR funded project

1. Name in full (IN BLOCK LETTERS):
2. Father's Name :
3. Gender (Male / Female/ Other):
4. Date of Birth:
5. Age as on 27 Jan 2022:years.....months..... days
6. Address for Correspondence :

7. Permanent Address :

8. Mobile No: :

9. **Email ID (mandatory for communication purpose for this project):**
10. Whether belongs to SC/ST/OBC/Physically Handicapped:
11. Fields of Research Experience (if any):
12. Educational Qualification (Enclose self-attested photocopies) :

Affix recent
passport size
photo

S.No	EXAM PASSED	GRADE	YEAR OF PASSING	BOARD / UNIVERSITY	SPECIALIZATION
1.	Higher Secondary				
2.	Under Graduation				
3.	Any other (specify)				

13. Work Experience: _____ years _____ months

S.No	PERIOD	POST HELD & SCALE OF PAY	NAME OF THE EMPLOYER	REASON FOR LEAVING

14. If selected what period would you require for joining the post _____ : 1 week /1 month / other
15. Have ever been declared unfit by a Medical Board / Court _____yes / No _____for appointment in any Govt. / Service? if yes, give details
16. Have you ever been tried / convicted for any crime by any court of law _____yes/ No _____
17. Check List: (Please tick as proof of enclosures) All Certificates must be attested and be attached in the following order:
- Certificate in support of age (Tenth equivalent/High School Certificate)
 - Degree/Diploma
 - Experience Certificate.....
 - Caste certificate (If any)
 - Any others (if any)

DECLARATION BY THE APPLICANT

I,-----hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligible and detected before or after Exam/Interview, I hereby convey my consent for cancellation of my candidature. Further, I declare I have gone through all the terms and conditions of the appointment. I will abide the same and I will not claim any regularization.

Date:

Place:

Signature of candidate

Sl. No.	PERIOD	POST HELD & SCALE OF PAY	NAME OF THE EMPLOYER	REASON FOR LEAVING