Indian Council of Medical Research

			(Application Form)		
1.	Name of the Post, applied for				
2.	Name in full (INBLOCKLETTERS)	<u>:</u>			Latest
			[NAME] [SU	RNAME]	photograph
3.	Mother's Name Father's Name Husband's Name (if married)	:			
4.	Address for Correspondence	:			
E	Downson out Addis-				
5.	Permanent Address	•			
6.	Date of Birth (Certificate must be supported)	:_		Age	(in year):
7.	Whether SC/ST/OBC/General	Ι		Relig	gion:
8.	Marital Status	: 1	Married/ Unmarried		
9.	Educational Qualifications		(Certificates in prod	of of qualifications r	nust be supported).
SN	EXAM.PASSED G	RADE	YEAROF PASSING	BOARD/ UNIVERSITY	SPECIALIZATION
100					
1					
		-61			

10. Work Experience (Certificates in proof of experience must be supported):

	From date	To date	Nature of Duties	Last Salary Drawn
				488 2 2
4. 934				
otal Everania				
otal Experience gained	l after acquiri	ng the minim	num essential qualif	cation (in years):
1. Details of NET/GATE	E/National le√	el exams pa	assed, if any.	
Exam passed		Date of	passing	Valid till
The state of the s				
		and the second		
Number of multipation				
2. Number of publication	ns if any(proc	of should be a	attached):	
2. Number of publicatio	ns if any(proc	of should be a	attached):	
2. Number of publication 3. If selected what perion 4. Have you ever been covt. Service?Yes/No. If	od would you declared unfi	require for jo	pining the post:	ppointment in any
3. If selected what perion 4. Have you ever been ovt. Service?Yes/No. If	od would you declared unfi yes, details	require for jo	pining the post: al Board/Court for a	by me are true to the boot of
B. If selected what periods. Have you ever been over been over. Service?Yes/No. If eclaration: I hereby decly knowledge and believer.	od would you declared unfi yes, details clare that the ef. Furnishin	require for jour to by a medic particulars for good false in the control of the c	pining the post: al Board/Court for a urnished in this form	
B. If selected what perion I. Have you ever been ovt. Service?Yes/No. If	od would you declared unfit yes, details clare that the ef. Furnishin	require for jo t by a medic particulars for g of false in cancellation	pining the post: al Board/Court for a urnished in this form nformation or supp of my candidature.	by me are true to the boot of