

Central Council for Research in Yoga & Naturopathy

61-65, Institutional Area, Janakpuri, New Delhi- 110058

(FILL IN CAPITAL LETTERS & SIGN ALL PAGES)

1.	Post applied for: Affix one passport size recent photo	
2.	Whether belongs to SC/ST/OBC/Gen category	
3.	Date of Birth (as recorded in the enclosed attested copy of Matriculation or equivalent certificate)	
	DD MM YY 4. Gender: Male Female Mark "√" in the relevant box.	
5.	Name: (in Block Capital letters) (as in matriculation or equivalent certificate)	
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6.	Father"s / Husband"s Name:	
7. 8.	Telephone Number (with STD Code) Landline:Mobile Email-ID:	
9.	Address for communication:	
		-
	City PIN	
	State/UT State/UT	

,	11. Nationality	:				
	12. Education	al Qualificat	ion (Enclose self-a	attested copies	s of certificate	s)
No. A	Name of Academic/ Professional Degree/Diploma	Discipline			Passing	% of Remarks Mark if any obtained
	13. Details of R	egistration in	Yoga & Naturopathy	/ from Statutory	/ Board (State/C	Central).
	14. Experienc	e starting t	from the latest			,
S. No.	Name and A		Post held	From	Period To	Remarks if any
1.		p y				

PIN

10.

2.

City

State/UT

Permanent Address

3.											
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4.											
5.											
,	15. Any other Information relevant for the post:										
	16. List of documents attached:										
	Declaration:										
	 I hereby declare that all statements made in the 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 at any point of time, my candidature appointment may be cancelled/terminated without any notice. I also declare that I am a citizen of India by birth/ domicile. 										
	Place :										
	Da	ite :	Signature of t	he Candidate)							