

APPLICATION FORMAT

Application for the post of _____

1. Name in Full (in Hindi) : _____
2. Name in Full (in block letters) : _____
3. Fathers Name (in block letters) : _____
4. Date of birth (DD/MM/YY) : _____
5. Address (in block letters) : _____

6. Nationality : _____
7. Gender (Male/Female) : _____
8. Whether belongs to SC/ST/OBC/
PH etc. (attach proof) : _____
9. Marital status : _____
10. Employment Exchange Name : _____
11. Registration No. in Employment : _____
Exchange and invalidity date
12. Educational Qualifications :

Recent Passport
size photograph of
the Candidate

Sl. No.	Name of Examination	University/Board	Year of Passing	Grade/Divn. & Percentage of marks in aggregate	Subject Passed

13. Experience (Particulars of all Previous :
and present employment) if any

Sl. No.	Name of Employer (indicate private/Autonomous Body/Government)	Designation	Pay Scale/ Salary	Period	Remarks

14. Particulars of fee remitted, DD No. , : _____
Date & Amount

15. State whether any relative is : _____
working at PDFMD/ICAR (Yes/No)

(i) If yes, write the name, designation : _____

(ii) Address of the employee : _____

(iii) Describe the nature of his/her : _____
Relationship

DECLARATION

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect/incomplete or ineligibility being detected at any time before or after selection, my candidature is liable to be rejected and I shall bound by the decision of the employer.

Place: _____

Signature of candidate

Date : _____

Encls:
