## CSIR-CENTRAL SCIENTIFIC INSTRUMENTS ORGANISATION

(Council of Scientific & Industrial Research)

# Sector 30-C, Chandigarh

**APPLICATION FORM**

**(Advt. No. 6/2020:** **Engagement of Project Staff)**

**Name of the Position applied for:** Project Assistant / Project Associate-I / Project Associate-II / Senior Project Associate / Project Scientist-I / Project Scientist-II (Please strike off whichever is not applicable)

Paste latest passport size photograph

1. Name of the Candidate:

2. Father’s/Husband’s Name:

3. Date of Birth (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_):

Age (as on last date of receipt of application) \_\_\_\_years\_\_\_\_months\_\_\_\_days

4. Address for Correspondence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Distt-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

State-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, PIN-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Whether SC/ST/OBC/EWS/PH (Certificate in the prescribed proforma to be attached): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Details of qualification as under: **Please attach scanned copies of certificates**

**(Starting from 10th/Matriculation onwards including details of NET/GATE examination)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr. No.** | **Name of Examination** | **Name of University / Board** | **Subjects / Area** | **Maximum Marks** | **Marks Obtained/ CGPA** | **Division / Percentage** | **Year of Passing** |
|  |  |  |  |  |  |  |  |

7. Experience, if any :

(Including in CSIR Laboratories

as Project Assistant/JRF/SRF/SPF/PF etc.)

**(Please attach scanned copies of documentary evidence)**

8. Presently working / engaged as:

9. Publications and Patents, if any (Please attach a separate complete list of publications marked with best five publications):

No. of papers in Journals \_\_\_\_\_\_\_ No. of papers in Conference \_\_\_\_\_ No. of patents granted/filed \_\_\_

10. Whether you have any relation/ blood relation with any employee, working in CSIO Chandigarh/ any CSIR Lab/Instt., if so, give his/her complete details i.e. relationship, name, designation etc.:

11. Any other relevant information:

I hereby declare that the information given above is correct to the best of my knowledge and nothing has been concealed. In case, at a later date, if it is proved at any time that the above information is false, then my candidature for the position may be cancelled.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:

Mob. No.

E-mail:

**Encl: Scanned copies of above qualifications, age, experience, category *etc.* (as per instructions provided in the advertisement) and data sheet in Excel file.**