**APPLICATION FORM FOR RESEARCH ASSOCIATE IN ITR**

**(To be typed and scanned after signature by the candidate)**

**Advertisement No.- ITR/HRD/8014/JRF/2022/01**

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| --- | --- | --- | --- |
| 01. | Full Name in Block Letters | ………………………………………. | Pleaseaffix arecentpassport sizePhotograph |
| 02. | (i) Father’s Name(ii) Husband’s Name(For married women only)(in Block Letters) | …………………………………………………..…………………………………………………… |
| 3(a) | Gender : Male Female Transgender | 3(b) Category : GEN SC ST OBC |
| 3(c) | Date of Birth : | D | D | M | M | Y | Y | Y | Y | 3(d) Age: …... yrs ….... months (as on 07/05/2022) |
| 04. | Correspondence Address: (in Block Letters) |   Pincode: |
| 05. | Permanent Address:  (in Block Letters) |   Pincode: |
| 06. | Contact Details: Phone(with STD code) : Mobile: +91‑ |
|
| 07. | E-mail ID: |  |
| 08. | Educational Qualifications (From Matric/10th/HSC onwards, Self-attested copies to be enclosed): |
| **Examination****Passed** | **Subject(s)** | **Board/ University** | **Month & Year****of Passing** | **Division/****Class/Grade** | **Percentage (%)****/CGPA** |
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| 09. | Experience (if any) **Note:** Attach sheets if required |
| **Name of Post****/Designation** | **Name of the****Organization/Dept.** | **Period of Service** | **Job Description (in Brief)** |
| **From** | **To** |  |
|  |  |  |  |  |
| 10. | Whether Qualified GATE Examination: YES NO |
| If yes, give details (proof to be enclosed) Enrollment/Roll No.:………………..Year:…….....Score :………………. |
| 11. | Have you ever been debarred for recruitment examination by any Govt. agency YES NO |
| if so give details: |
| 12. | **DECLARATION:** I hereby declare that, the above furnished particulars are correct to the best of my knowledge and no information is suppressed. If at any time I am found to have concealed/distorted any information, my fellowship shall be liable to summarily terminated without any prior notice. I am ready, to take up and discharge the duties assigned to me anywhere in India, as and when required. |
| **Place:** | **For Office Use Only** | **Signature of the Candidate** |
|  **S.No.** |
| **Date:** |  **Signature of the official** |