APPLICATION FORM FOR RESEARCH ASSOCIATE - NPOL, KOCHI-21

| | (TO be The | a in block letters) | |
|-----|---|-----------------------------------|--|
| 1. | Name (in full) | | J |
| 2. | Gender | Male/Female/Transgender | Affix a recent |
| 3. | Subject | Ocean Sciences | passport size photograph with self attestation |
| 4. | Date of Birth (dd/mm/yyyy) | | |
| 5. | Age as on closing date | yearsmonthsdays | |
| 6. | Category | General SC ST OBC | |
| 7. | Nationality | | |
| 8. | Postal address for correspondence with Pin Code | | |
| 9. | Mobile No. & Email ID | +91- | |
| 11. | Aadhaar Card No. | | |
| 12. | Have you ever been awarded JRF/SRF/ Research Associate previously in DRDO or other organizations? | YES (Please provide details) / NO | |
| 13. | Whether qualified in GATE or UGC/CSIR-NET Examination? | YES (Please provide details) / NO | |
| | | | |

| 14. | Educational Qualifications | Undergraduate level | Postgraduate level | Details of Ph.D |
|-----|---|---------------------|--------------------|-----------------|
| | Percentage of Marks / CGPA | | | |
| | Year of completion | | | |
| | Discipline (as per degree certificate) | | | |
| | Name of College | | | |
| | Address of College | | | |
| | Name of the Board / University | | | |

| 15. | Details of Papers Published | | | | |
|-----|---|----------------|-----------|------|--|
| | SI No. | Title of Paper | Author(s) | Year | Details of Journal etc. where published |
| | | | | | |
| | | | | | |
| 16. | Details of previous employment & experience, if any. (Attach separate | | | | |

sheet if required)

I hereby declare that the above details are correct and no material facts have been suppressed. If at any time in the future the information provided by me is found to be false, my candidature shall be cancelled or I shall be terminated summarily from Fellowship, apart from other civil/criminal proceedings being initiated against me.

Place :

| Date : | | Signature of the candidate Name: |
|------------------------------|------|-------------------------------------|
| FOR OFFICE USE ONLY: | | |
| Application Number Allotted: | RA - | Date of receipt: |