

ICMR-National Institute of Virology

BIO-DATA

1. Name of the Post, applied for : _____

2. Advertisement No. : _____
3. Name in full (IN BLOCK LETTERS) : _____
 [SURNAME] [NAME] [FATHER/HUSBAND]
4. Mother's Name : _____
 Father's Name : _____
 Husband's Name : _____
5. Address for Correspondence : _____

 Contact No. _____
 Email id: _____
6. Permanent Address : _____

7. Date of Birth (Certificate must be supported) : _____ Age : _____
8. Whether SC/ST/OBC/General : _____ Caste: _____
9. Marital Status : Married / Unmarried
10. Educational Qualifications : (Certificates in proof of qualifications must be supported).



SN	EXAM. PASSED	GRADE	YEAR OF PASSING	BOARD / UNIVERSITY	SPECIALIZATION


 ADMINISTRATIVE OFFICER
 NATIONAL INSTITUTE OF VIROLOGY
 PUNE.

11. Work Experience (Certificates in proof of experience must be supported):

SN	Period				Post held	Name of Employer	Reason for leaving
	From date	To date	No. of Yrs	No. of Mths			

Note: Additional information, if any can be provided on a separate paper or on overleaf of this page.

12. Details of NET/GATE/National level exams passed, if any.

Exam passed	Date of passing	Valid till

13. If selected what period would you require for joining the post: _____

14. Have you ever been declared unfit by a medical Board/Court for appointment in any Govt. Service? Yes/No. If yes, details _____


Declaration: I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief. Furnishing of false information or suppression of facts will be disqualification and is likely to render the candidate unfit.

Date: _____

Signature: _____

Place: _____

Name of the candidate: _____


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