

APPLICATION FORM

PROJECT FELLOWS / CONSULTANT

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1. Advertisement No. : _____
2. Position Code Applied for : _____
3. Name (in Block Letters) : _____
4. Father's Name : _____
5. Date of Birth (DD/MM/YYYY) : ____ / ____ / ____
6. Age as on date of Interview : ____ Years ____ Months ____ Days
7. Gender (Male/Female) : _____
8. Nationality : _____
9. (i) Postal Address : _____
(ii) Permanent Address : _____
(iii) Email-ID & Mobile No. : _____
10. Whether NET qualified (UGC/CSIR/ARS) (give details) : _____
11. Category (SC/ST/OBC/GEN) : _____
12. Details of Qualification : _____

<i>Exam Passed</i>	<i>Board/University</i>	<i>Year of Passing</i>	<i>Subjects</i>	<i>Marks%</i>	<i>Division</i>

13. Experience, if any : _____

<i>Name of the Employer</i>	<i>Designation</i>	<i>Period</i> <i>From - To</i>	<i>Pay drawn</i>	<i>Nature of duties</i>

14. Any other information : _____

Undertaking / Declaration

I hereby declare that all the statements made in the application are correct and complete; and nothing has been concealed to the best of my knowledge and belief. In the event of any information being found false or incorrect at any time, action may be taken against me and I shall abide by the decision.

Signature of the Candidate with Date

List of Enclosures :



Institute of Pesticide Formulation Technology (IPFT)
Sector-20, Udyog Vihar, Gurugram – 122 016 (Haryana)

Appl. No. _____

APPLICATION FORM FOR CONSULTANT (RETD. FROM GOVT. SERVICE)

Advt. No. _____ dated _____

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duly attested
by the
candidate

1. Name in Full (In Block letters) : _____
2. Father's / Husband's Name : _____
3. Nationality : _____
4. Sex : _____
5. Date of Birth : _____
6. Age (As on due date of application) : _____
7. Date of Retirement, if applicable : _____
8. Office where last worked, if applicable : _____
9. Last Pay Drawn, if applicable : _____
10. Present Address : _____

Tel. No. : _____

Mobile : _____

E-mail : _____

11. Permanent Address : _____

12. Educational & Technical Qualification :
(Add separate sheet, if required)

<i>Exam Passed</i>	<i>Name of the University</i>	<i>Years of Passing</i>	<i>Subjects</i>	<i>Division</i>	<i>Percentage of Marks</i>

10. Experience Details :
(Add separate sheet, if required)

<i>Ministry / Department / Office / Organization</i>	<i>Name of Post</i>	<i>Pay Scale / Salary</i>	<i>Period</i>		<i>Nature of Duties</i>
			<i>From</i>	<i>To</i>	

11. References of two superior officers under whom the applicant has worked :

<i>Particulars</i>	<i>Reference 1</i>	<i>Reference 2</i>
Name		
Designation		
Ministry / Department		
E-mail ID		
Contact Number		

DECLARATION

I solemnly declare that all the statements made in the 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/interview, my candidature is liable to be rejected and I shall be bound by the decision of the Director-IPFT.

Signature
Full Name of the Applicant

Place :

Dated :