Indian Council of Social Science Research (ICSSR)

Aruna Asaf Ali Marg, JNU Institutional Area, New Delhi – 110 067 www.icssr.org Affix recent
passport size
photograph
duly signed by the
applicant

FORMAT OF APPLICATION

1.	Post applied for	: SENIOR CONSULTANT RESEARCH
2.	Name of the applicant	:
3.	Father's Name	:
4.	Husband's Name (In case of Married female candidate	<u>a):</u>
5.	Date of Birth (DD/MM/YYYY) & Age as on Last date of Application	:
6.	Nationality	:
7.	Sex- Male/Female	:
8.	Category (SC/ST/OBC/Gen./PH)	:
9.	Address for communication	:
		Pin Code:
10.	E-Mail ID	:
11.	Telephone/Mobile No.	:
12.	Last post held/ Name of the office	:
13.	Date of Retirement from the last Post	:
14.	Last Basic Pay	:

S. No.	Exams Passed	Board / University	Year	Division	Percentage (%)	Subject
		<u> </u>				

(Please attach attested	photo copie:	s of the te	estimonials)
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16. Details of Professional/	
Technical Educational Qualification	:

17. Experience:

S.	Name of organization with address	ion held	From	То		Experience	:	Nature of duties (attach experience Certificate)	Whether regular/ ad- hoc/Full time/Part time
No.					No. of Years	Months	Total		

(Please use extra sheets if required)

18. Languages Known	:
19. Any other relevant information	
Which you would like to mention	
in support of your suitability for	
the post applied for	·

20. DECLARATION:

(i)	I hereby declare that I fulfil the eligibility conditions as per the
	advertisement and that all the statements made in this application are
	true, complete and correct to the best of my knowledge and belief. I
	understand that in the event of any information being found false or
	incorrect at any stage or not satisfying the eligibility conditions according
	to the requirement mentioned in the advertisement, my candidature/
	appointment is liable to be cancelled / terminated.
	·

		incorrect at any stage or not satisfying the eligibility conditions according to the requirement mentioned in the advertisement, my candidature/appointment is liable to be cancelled / terminated.			
	(ii)	I have enclosed the required self-attested copies of the certificate.			
		(Signature of the applicant)			
Place:					
Date:					