

# Indian Council of Social Science Research (ICSSR)

Aruna Asaf Ali Marg, JNU Institutional Area, New Delhi – 110 067 www.icssr.org

## **FORMAT OF APPLICATION**

1.	Post applied for	:
2.	Name of the applicant	:
3.	Father's Name	:
4.	Husband's Name (In case of Married female candidate	e):
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.	Present post held/ Name of the office	:

Affix recent passport size photograph duly signed by the applicant

## **13. Educational Qualifications:**

S.No.	Exams	Board /	Year	Division	Percentage	Subject
	Passed	University			(%)	
(=)						

(Please attach self-attested photo copies of the testimonials)

### 14. Details of Professional/

Technical Educational Qualification :

### 15. Experience :

S.No.	Name of organization with address	Post held & pay	From	То	Experience Total Period (Years/Months/Days)		Nature of duties (attach experience Certificate)	Full time /Part time	

(Please use extra sheets if required)

16. Languages Known	:
17. Have you ever been imposed any penalty (If yes, please give details)	:
18. If any departmental inquiry pending or contemplated against you. (If yes, please give details)	B :
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.
- (ii) I have enclosed the required self-attested copies of the certificate.

(Signature of the applicant)

Place:

Date: