# To,

**Application Form**

# THE CHAIRPERSON,

***Latest passport size photograph (self-attested)***

**MITRANIKETAN KRISHI VIGYAN KENDRA (ICAR), MITRANIKETAN P.O. 695543,**

**VELLANAD, THIRUVANANTHAPURAM DISTRICT KERALA.**

**Subject:** Application for the post of *(In Bold Script)* :

# Notification Reference:

1. **Full name** (In block letters)

(First name) (Middle name) (Surname)

# Address for correspondence:

1. **Telephone number** (Landline) : Mobile no:

# E-mail ID :

1. **Date of birth:** Day Month Year

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

1. **Age as on closing date** : Years Months Days

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

1. **Gender**: Male/ Female / Others
2. **Category**: General/SC/ST/OBC/PwD :

# Educational qualifications:

*(Details with attested copies of mark sheet and certificates of all the qualifications are required)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl.  No. | Name of the Examination | University/Board/Institute | Subjects/ Discipline | Class/ Grade/Percentage | Year of Passing | Subject of Specialization |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

# Experience including present post

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of office/ Division | Post held | Pay scale | Working experience | | | | Duties performed in brief | State whether in service or  not | Reason for leaving the post |
| From | To | Total | |
| Y | M |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

Y – Year M – Month

# Extracurricular activities:

i)

ii) iii)

1. **D.D.** No.

Bank

Date

Rs. 300/- (Rupees Three Hundred Only) in favour of The Director, Mitraniketan, payable at SBI, Vellanad towards the processing fee is enclosed herewith).

# Declaration

I do hereby declare that, all the particulars furnished in this application are true and correct. I clearly understand that any false, misleading and incorrect statement or information contained here will render me liable to appropriate action as may be decided by the host organization.

# Date :

**Place :**

1. **List of Enclosures:**

**1.**

**2.**

**3.**

**4.**

**5.**

Signature of applicant

(Name of Applicant)

***APPLICATION FOR THE POST OF*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To**

**From -**