**ICAR-RESEARCH COMPLEX FOR EASTERN REGION, PATNA**

**APPLICATION PROFORMA**

|  |  |
| --- | --- |
| **Post applied for** |  |

|  |  |  |
| --- | --- | --- |
| **Sl.No.** | **Details** |  |
| **1.** | Name of the Candidate (in block letters)  |  |
| **2.** | Date of Birth |  |
| **3.** | Sex (M/F) |  |
| **4.** | Category (UR/OBC/SC/ST) |  |
| **5.** | Present place of posting |  |
| **6.** | Postal Address |  |
| **7.** | Permanent Address |  |
| **8.** | Mobile No. |  |
| **9.** | Email ID |  |
| **10.** | Date and post on which initially appointed |  |
| **11.** | Category (UR/OBC/SC/ST) on which initially appointed  |  |

**12.** Educational Qualification:-

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Exam Passed** | **Board/University** | **Year of Passing** | **Subject** | **Percentage** |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

1. Details of technical Qualifications, if any:
2. Service details:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the Institute** | **Post Held** | **Scale of Pay** | **Period** | **Nature of duties performed** |
| **From**  | **To** |
|  |  |  |  |  |
|  |  |  |  |  |

I do, hereby, declare and certify that the information provided above is correct and true to the best of my knowledge and belief.

 **Signature of the applicant**

Certified that the information furnished by the applicant has been verified with the Service record and found correct.

 **Signature of the Authorized signatory with stamp**