REGISTRATION FORM

Photo

Ref: Advertisement No: 46/2021-HRD								Piloto	
Post N	o.:								
01. Name of the Candidate (in Block Capital letters) 02. Date of birth			: Dr / Mr / Ms						
03. Father's/ Guardian's name			:						
04. Nationality			:						
05. Religion			:						
06. Do you belo	ong to SC/ST	OBC ?	:						
07. Permanent	Address		:						
08. Address for	communicat	tion	PIN:						
OO. Address for	communicat	lion							
Email: 09. Have you wo	orked at CSI	 D NIEIQT/	PhNoMobile:						
CSIR as Pro If yes, please	ject Worker	?	Date of joiningDate of release						
ii yes, pieasi	e state the de	etalis	Project NumberDivision:						
in CSIR-NEI state the det 11. Highest Qua 12. Area of Spec	ST/ CSIR ? I ails. lifications cialization	lf yes, please	:						
13. Academic Qualifications commencing fr Examination Year of Board/Un							Division/ % of marks		
passed	passed passing						Class	obtained	
14. Experience, Name of the C	if any:)rganization	Designation	on Period Last I			Last Pay	Pay Nature of Duties		
June or the organization		200.9.1.4.1.	J	From To			114141	0. 2400	
15. NET Qualifie 16. GATE Qualif 17. Number of P	ied : `	Yes/ No Yes/ No	Valid Upto : Valid Upto : Average IF:						
				view (please spe					
19. Declaration :		, μυτιαί					• • • • • • • • • • • • • • • • • • • •	•••••	
		above informat	tion are tru	ue and correct to	the best of m	y knowledge	and belief.		
Date :						. 5			

(Signature of the Candidate)

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