Central University of Tamil Nadu
तमिलनाडुकेन्द्रीयमिश्वमिद्यालय

(Established by an Act of Parliament, 2009)

Thiruvarur 610005

APPLICATION FOR THE POST OF PROJECT RESEARCH SCIENTIST:1

ICMR PROJECT

Recent photograph

1. Name of the applicant :
2. Father's Name :
3. Date of Birth & Age :
4. Sex :
5. Marital Status :
6. Nationality :
7. Address with phone number and email ID:

8. **Academic Record**

(a) **CSIR/UGC/GATE Exam Qualification details with Percentage, Rank, year of pass etc.**

(b) Qualifying Examination (10th Standard onwards)

S. No.	School/Degree	Board/University	Grade/ %	Subjects	Year of Passing

(c) Details of the M.Sc., project carried out with title, duration, place of work, area worked on, mentor/guide's name (Must to bring a copy of M.Sc., thesis)

(d) List of publications (if any)

(e) List of conferences/ Seminars/ Workshops participated (if any)

9. Working Experience (if any)

S. No.	Organization Name	Designation	Job Responsibilities	Duration	
				From	To

10. Name and addresses of two referees along with phone numbers and E-mail address:

Name:	Name:
Address:	Address:
Phone:	Phone:
E-Mail:	E-Mail:

8. Any other relevant information: (Please attach separate sheet if required)

Declaration

I hereby declare that I have carefully read and understood the instructions and particulars on this application and notification and that all entries in this form as well as in the attached sheets are true to the best of my knowledge and belief.

Date: Signature

Place: