

ICMR-REGIONAL MEDICAL RESEARCH CENRE Keylong Field Station, Himachal Pradesh

APPLICATION FORMAT FOR THE POST OF Technician/Driver

Photo

Post a	applied for
1.	Name in full (Block Letters)
2.	Parent's/ spouse's name
3.	Sex 4. Nationality 5. Marital Status
6.	Date of birth (dd/mm/yy)
7.	Age (as on 17.04.2022) Years Months Days
8.	Category (General / SC / ST /OBC / PH) [Enclosed proof of Caste certificate issued by Competent Authority]
9.	Address for Communication
10.	Contact No. Email
11.	Educational qualifications: (attached self-attested photo copies)

S No.	Exam passed	Name of Board / University	Subjects	Year of Passing	% of Marks

12. TECHNICAL QUALIFICATIONS

S.No.	Diploma / Certificate	Name of Organization / Institute / Medical college	Subjects	Year of Passing	% of Marks

13. Details of Experience (current occupation first)

S. No.	Name of employer	Date of	Date of	Nature of
		joining	leaving	Employment/Duties

^{*}Additional information may be provided on separate sheets

DECLARATION

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage, my candidature/appointment shall be liable to cancellation/termination without notice or any compensation in lieu thereof.

Place:	(Signature of candidate)
Date:	



ICMR-REGIONAL MEDICAL RESEARCH CENRE

Keylong Field Station, Himachal Pradesh

APPLICATION FORMAT FOR THE POST OF SCIENTIST/ TECH. OFFICER

Post a	pplied for					
1.	Name in full (F	Block Letters)				
2.	Parent's/ spous	se's name				
3.	Sex	4. Nationality	5. Marital S	Status		
6.	Date of birth (dd/mm/yy)			-	
7.	Age (as on 16.	.04.2022) Years	Months	Days		
8.	Category	(General / SC / ST /OBC / Pl [Enclosed proof of Caste cert	,		ity]	
9.	Address for Co	ommunication				
10.	Contact No.	Ema	il			
11.	Educational qu	ualifications: (attached self-atto	ested photo copies)			
S. No.	Exam passed	Name of Board / University	Subjec	ts	Year of Passing	% of Marks
						1

Photo

12. The Languages Known, state any Examination passed in each)

(v)

When Degree is likely to be awarded

Language	Read Only	Speak Only	Read & Speak	Examination Passed

13	should	_	tement about indexe		_	Details of published papers Paper. List of Publications
	No. of	Publicati	ons:			
13.1	{Publi	cation as	First Author and / or	Corresponding Auth	or in indexed Journals	
13.2	Public	ation as C	Co-author in indexed	Journals:		
13.3	Papers	Papers in Books, Proceedings & Non indexed Journals:				
14	Total Research Experience with details in each area:					
15	Major	Academi	c / Other achievemen	nts:		
16	If Reg	istered for	r M.D / Ph.D Degree	e, give details;		
	(i)		for which registered			
	(ii)	•	of Thesis:			
	(iii)		Registration			
	(iv)	Date an	d Year of passing w	ritten Examination, if	any:	

	(Name of Awards / I	Fellowship, Year	, Awarded by)		
18	National / Internatio (List with title of paper)			ttended	
19	Membership of Nati National:	onal and Internat	ional Bodies		
	International:				
20	Give particulars of E	Employments held	d in Chronologi	cal order:	
N	lame of employer & Address	Date of Joining	Date of Leaving	Designation & Nature of Work performed	Salary (excluding allowances) last drawn & Scale of Pay
21	Copies of Testimoni	als:			
	(1)				
	(2)				
	(3)				
	(4)				

Awards and Prizes received:

17

22	Candidates may mention here the details of Annexure, if any. Any other information relevant to the applicant may be mentioned here.
23	If selected, what notice would you require before joining?
24	Details of Enclosures:
	(i)
	(ii)
	(iii)
	(iv)
	(v)
	(vi)
	(vii)
•	DECLARATION
belief.	by declare that the information furnished above is true, complete and correct to the best of my knowledge and I understand that in the event of my information being found false or incorrect at any stage, my candidature/atment shall be liable to cancellation/ termination without notice or any compensation in lieu thereof.
Place:	(Signature of the candidate)
Date:	