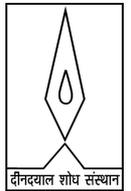




**Deendayal Research Institute, Krishi Vigyan Kendra,
Ganeeva, Chitrakoot (U.P.)**



APPLICATION FORM FOR THE POST PROGRAMME ASSISTANT

(LAB ASSISTANT/ T-4)

Please affix your
latest passport
size self-attested
photograph

(To be filled by the Applicant)

Name of applicant (in block letters)	
Post applied for	
Advertisement No. and Date	
DD no. with Date and Name of the Bank	

APPLICATION FORM

1.	Name of the Candidate in full (in capital letters as appearing in the degree certificate)							
2.	Father's Name/ Husband's Name							
3.	Present Postal Address (to which communications to be sent) with pin code, email and mobile no.							
4.	Permanent Address (with pin code)							
5.	Nationality							
6.	Sex (Male/Female/others)							
7.	Marital status (Married /Unmarried)							
8.	Category (UR/OBC/ST/SC/EWS) Enclose a category certificate in the prescribed format from the competent authority							
9.	Date of Birth (to be supported by a copy of the valid certificate/ Secondary School marks card)	Day	Month	Year	Age on closing date	Year	Months	Days

10. Educational Qualifications:							
S. No.	Exam/ Degree/ Diploma	Name of Board/ Univ.	Year	Subject studied	Marks obtained (% or grade)	Class of Division	Remarks
	High School						
	Intermediate / +2						
	Graduate						
	Post-Graduate						
	Any other Degree(s)/ Diploma(s)						
	Any other qualification						

11. Professional experience:						
S. No.	Designation & Pay Scale /total monthly emoluments	Nature of Employment (Regular/Temporary)	Date of Joining	Date of Leaving	Reason for leaving	Duration (Year/Months)

12.	Have you ever been punished during your studies at College/University? (Yes/No)	
13	Have you ever been punished during your service or convicted by a court of law? (Yes/No)	
14.	Were you at any time declared medically unfit or asked to submit your resignation of discharged or dismissed? (Yes/No)	

Declaration

I, _____ son/daughter of _____ hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief and also that I have not concealed any fact . In the event of any information found false or incorrect or ineligibility being detected at any stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be cancelled by the University.

I also hereby declare that I have not been convicted by Court of Law for any offence or contemplated for any unlawful activity.

I certify that I have read general Instruction

Signature of the Applicant

Date : _____

**Application not signed by the candidate is liable to be rejected*

- **Attach self-attested copy of certificate issued by competent authority.**

	List of certificates testimonials (self- attested) & other documents attached with application	
1.	Bank Draft	
2.	Medical fitness certificate	
3.	Certificate from Personnel Officer for in-service candidate (Annexure II)	
4.	Caste certificate (if applicable)	
5.	A. Testimonials	
	B. Transcripts	
	C. Certificates	
	D. Degrees	
6.	Experience certificates along with details of salary per month, grade	
7.	Other supporting documents	

Total number of attached documents:

Total number of attached pages:

Annexure -1

Medical Certificate

May be provided in the format or on the letterhead of Hospital or medical Doctor

Medical Fitness Certificate to be issued by the Medical Doctor (MBBS or higher qualification)

I have personally examined the applicant, Name.....,
S/D/of..... and found him/her medically fit/ unfit

Annexure II

No Objection Certificate

Certified that Mr./Ms/Mrs./Dr.....
S/D/of.....Is working as in the
pay scale/grade.....From..... To.....
On regular/ad-hoc/contractual basis. No vigilance enquiry/ disciplinary cases are pending
against him/her. He/ She have not been punished since last 5 years. His/her work of last 5
years is found satisfactory. If selected, he/she will be relieved.

Signature.....

Date.....

Name :

Designation with official seal:.....