Application Form

Advertisement No. 2/2025-R&A

Application for engagement of Part-Time Doctor at CSIR-CGCRI, Kolkata-70032

1.	Name in full(Block Letter)		Self -Attested photograph to be pasted
2.	Father's/Mother's Name		
3.	Date of Birth		
4.	Nationality		
5.	Religion		
4.	Whether belongs to SC/ST/OBC/PH/EWS/General		
5.	Date of superannuation and PPO No from Government service (if any)		
6.	Office address at the time of retirement(if any)		
7.	Mode of Retirement/Superannuation/VR/any other mode of release from service		
8.	Complete residential Address with phone number/Mobile No.		
9.	E-mail id		
10.	Phone/Mobile No.		
11.	Aadhar No.		
12.	Educational Qualification (in chronological order from10thstandard onwards with supporting Documents.)		

	Exam Passd	University/Institution/Board	Year of Passing	Subjects	Marks %	Division/Class

13.	**Employment records (in chronological order, starting with the first job)**				
	Name and address of Employer/Institution	Period		Designation of post held and scale of pay	Nature of work and level of responsibilities.
		From	To		
14.	Additional relevant information, if any, in support of your suitability for the said engagement, attach a separate sheet, if necessary				
15.	Details of Enclosures			(i) Educational Qualification: (ii) Experiences: (iii) PPO (if superannuation from Government Service): (iv) Any other relevant documents:	

16. Valid Registration Number:

17. Details of blood/close relative employed in CSIR-CGCRI:

18. Undertaking/Declaration:-I hereby declare that all the statements & information made in the application are correct and complete to the best of my knowledge & belief and nothing has been concealed/ distorted. I further declare that I was clear from vigilance angle at the time of my retirement (in case of Govt. Employee) and I am medically fit to perform office work. In the event of any statements & information being found false or incorrect at any time, action may be taken against me and I shall abide by the decision of authority, my engagement shall be liable to be summarily terminated without notice/compensation.

(Signature of Candidate)

Name…….

Place……...

Date……..