

Application format for appointment of Consultant in the CSIR-CIMAP
(Advt no. Consultant/408/2020)

1. Name : _____
2. Sex (Male/Female) : _____
3. Date of Birth : _____(DD/MM/YYYY)
4. Age as on (20/09/2018) : _____ Year _____ Months _____ Days
5. Nationality : _____
6. Mailing Address : _____



7. E-mail & Mobile no. : _____
8. Permanent Address : _____

9. Educational Qualification :

Sl.No	Course	Subject	University/Institute	Year Passing	of	Division/Class

10. Work Experience :

Sl.No	Organisation/Institute	Period		Nature of Work	Remarks
		From	To		

11. Whether SC/ST/OBC/PWD/GEN : _____
12. Particulars of Close relatives : _____
working in CSIR-CIMAP/CSIR, if any
13. Are you under any bond/contractual obligation to serve Central/State Government/PSU/Autonomous or any other body/organization, if yes, give details : _____
14. Whether dismissed from service from any other Institution/Office or debarred by the Public Service Commission, if yes, give details : _____
15. Enclosures :

Undertaking

I hereby declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found or incorrect or ineligibility being detected before or after the examination, my candidature/engagement is liable to be cancelled. Further, I also declare that I have never been convicted by any court of Law. I also undertake to sign the agreement for engagement as Consultant before joining my duties, if selected.

Date : _____

Signature of Candidate-----

Name of Candidate -----

Proforma for Applicant's Envelope

Application for Consultant against Advertisement No. Consultant/408/2020

Last Date of Receipt of Application 30/06/2020

**To,
The Director,
CSIR-Central Institute of Medicinal and Aromatic Plants
(Council of Scientific and Industrial Research)
Kukrail Picnic Spot Road, P.O. CIMAP, Lucknow-226015**

Applicants Address:-

-----Pincode-----