

Annexure-A

APPLICATION FROM FOR THE POST OF _____

1. Name (in Block Letters):
2. Name of the ICMR Office
Where working (in Block Letters):
3. Date of Birth (in Christian Era):
4. Date of appointment in Government
Service (in Christian era):
5. Date of Retirement:
6. Substantive Pay Scale:
7. Present Pay Scale:
8. Education Qualifications:

S.No.	Examination or Degree obtained	Name of School /College	Name of Board/University	Year of Passing	Class /Division	Merit/Position &Percentage
1						
2						
3						
4						

9. Experience:
10. Nature of present employment (whether ad-hoc or
Temporary or permanent):
11. Details of Employment, in chronological order(Enclose a separate sheet, duly authenticated by
candidate's signature, if the space below is in-sufficient)

Name of Organization / office	Post Held	From	To	Pay Band + Grade Pay / Pay Level	Nature of Duties

12. Additional information, if any, which you would like to mention in support of your suitability for the post. Enclose a separate sheet, if the space is insufficient.
13. Please state clearly whether in the light of entries made by you, you meet the requirement of the post.
14. Whether belongs to SC/ST/OBC:
15. Remarks, if any:

Date :-

Telephone No:-

E-mail id:

Residential Address:

Signature of Candidate

Annexure-B

Certificate/information to be given by the Head of Office/ Employer of the applicant

1. It is certified that the particulars furnished by the officer in, Annexure-A, are correct as per the service records.
2. It is certified that no disciplinary/ vigilance case is pending or contemplated against the officer and he / she is clear from the vigilance angle.
3. His/ Her integrity is certified.
4. It is certified that no major or minor penalties have been imposed on the officer during the last 10 years.
5. APAR grading for the last 05 years in respect of the official is as under:-

Name of the Official	2013-14	2014-15	2015-16	2016-17	2017-18

6. The official will relieve from his duties to take up the assignment in DMRC on his/her selection.

**Director/Director-in-Charge/Sr.AO/AO/ SO
(ICMR/ICMR's Institutes)
Signature with Seal**

Date:-

Place:-