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Name

Age

Gender

Nationality

E-mail ID

Mobile Number

Academic qualifications (in reverse chronological order):

Date of Birth

Correspondence address

Permanent address

(Advt. No. 19/Project/2025/HR) Application for the Position of Project Scientist-II

SI. No.	Degree	Uni	versity/Institute	Passing Year	Subjects	Percentag
.1. Wh	ether NET/GATE/	National Level	exams passed, if any:			
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	tions held, if any	(in reverse ch			Period	
2. Pos	tions held, if any	(in reverse ch	ronological order):	Fi	Period rom	То
2. Pos	tions held, if any	(in reverse ch	ronological order):	Fi		
2. Pos	tions held, if any	(in reverse ch	ronological order):	Fı		

13. Awards and Honors

Agency/Organization which gave the award	Purpose	Nature of the award
14. Publications if any:		

Declaration

I declare that the information furnished above is true and correct to the best of my knowledge and belief, and that no related information is concealed. If any discrepancy is observed at any stage, RCB will be free to cancel my selection/candidature.

Date:	(Signature of the Candidate)
Place:	