## Annexure-I

Name	e of the Post Applied for :		Affix			
Locat	tion:			pas	Recent sport size Colour otograph	
1.	Name of the candidate (in Bl	ock latters):				_
1.	Ivame of the candidate (iii Br	ock letters).				
2.	Address for communication:					
	Contact No.:					
	Email ID:					
3.	Permanent Address:					
	Contact No.:					
	Email ID:					
4.	Identity proof submitted, with	a datails:				
4.	identity proof submitted, with	i details.				
5.	Eligibility criteria/documents	submitted:				
Sl. No.	Eligibility criteria		Details	Documents attached (Yes/No)	Verification (Office purpose only)	e
i.	a) Date of Birth	a)				
	b) Age (as on last date)	b) yea	rs; months;			
		days;				

Sl. No.	Educational qual	ifications	Name of the University/ Institute.	Year of Passing.	CGPA/OGPA /Percentage obtained.	Documents attached (Yes/No)	Verification (Office purpose only)
6.	Details of previous training/experience(if any):						
Sl. No.	Area of Experience/ Training	Experience details			Period	Documents attached	Verification (Office purpose
		Position held (Employee/ Trainee)	Name of the Institution.	From To	Years & Months.	(Yes/No)	only)
<b>Declaration</b>							

I hereby declare that I have read the notification for selection of Technical Analyst (Chemistry/ Microbiology) and the details given above and the supporting documents submitted are true & valid to the best of my knowledge.

Place:	Signature:
Date:	Name: