

INSTITUTE OF NANO SCIENCE & TECHNOLOGY

(An Autonomous Research Institute of Department of Science and Technology, Government of India)

Knowledge City, Sector 81, SAS Nagar, Mohali- 140306, Punjab

APPLICATION FORM FOR PROJECT RESEARCH SCIENTIST-I (NON-MEDICAL)

(Please fill the form in BLOCK CAPITAL LETTERS only) Affix latest For Office use Passport size color **Application No:** Photograph here **Date of Receipt:** 1. Post Applied for:_____ 2. Name of the Applicant Mr./Ms. (In block CAPITAL letters) 3. Father's/Mother's: 4. Gender: S. Date of Birth: Age Y M D 6. Marital Status: 7. Spouse's Name 8. Do you belong to GEN/SC/ST/OBC/PH category* *(Please enclose self-attested copy of the certificate, if applicable) 9. Present Mailing Address State: Pin code: _____ No. ____ Telephone and Mobile E-mail ID: 10. Permanent Address State: Pin code: No. ____ Telephone and Mobile E-mail ID:

11. Details of academic record [in chronological order from highest up to matriculation]	
(Self-Attested copies of the mark sheets/certificates to be enclosed)	

Sr. No.	Degree/ Exam (with discipline)	University / College / Board	Year of Passing	Percentage of Marks / CPI	Class/Grade/ Rank	Subjects Taken

12. Test Score Details (Please provide details of UGC/CSIR NET/GATE/Other examinations) (Please enclose duly self-attested copies)

Test	Registrati	Scor	re	Rank	Qualifying Year/Month	
	on	Percentage	Percentile	Kank	Year/Month	

13. Employment Record/ Research Experience: (including Post doctoral) [Details in chronological order, starting with present employment up to the first employment] (Self-Attested copies to be enclosed)

Sr. No.	Organization (also specify whether Govt./PSU or Autonomous body or /Private)	Post Held (Also specify whether regular or contractual)	Scale of pay/ Pay Band and Grade Pay	Duration (Exact dates to be given)	Total period (in years)	Nature of duties

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	14. Total Experience in years as on (): _ 15. Brief Details of Research Experience:								
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			pies of front-pag	ating Impact Factors of each publication			eparate sheet.		
				DECLARATION					
nothi infori	I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If, at any time, I am found to have concealed/distorted any material information, my candidature shall be rejected and/ or my appointment as Postdoctoral Fellow shall be liable to be summarily terminated without any notice/compensation.								
Date	:d:			Signat	ure				
Place	e:			Name:					