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	Degree	Year	Subject	Univ	rsity/Institution		% Marks/						
9.	9. Academic Qualification (X th Onwards)												
8.	8. Whether differently-abled: Yes/No												
7.	. Category:												
6.	Gender:												
5.	Date of Birth:												
4.	Institution:												
3.	Email-ID(s) and contact number(s):												
2	Correspondence address:												
1.	Name:	Name:											

13. Publications (if any).									
Sl. No.	Author (s)	Title of the paper	Name of Journal	Vol. No.	Page No.	Year			
1									
2									
14. D	petail of patents (if any	y):							
15. B	ooks/Reports/Chapte	rs/General articles etc. (if an	ıy):						
16. T	ime required to join t	he post, if selected:							
17. A	ny other Information	(maximum 250 words)							
18. Ju	ustify your candidatur	re (in 250 words)							
		Declaration							
	ation and that all entrie.	e carefully read and understons in this form and the attached s							
Date Place				_	nature ame				

12. Professional Recognition/ Award/ Prize/ Certificate, Fellowship received by the applicant.