This has to be designed in the ICMR web portal

Indian Council of Medical Research

BIO-DATA

1.	Name of the Post, applie	d for :					
2.	Advertisement No.	•					Latest photograph
3.	Name in full (IN BLOCK LET	TERS) :	[SURN/	AME] [NAM	ИЕ] [FATHER/HU	JSBAND]	priotograph
4.	Mother's Name Father's Name Husband's Name	:					
5.	Address for Corresponde	ence :					
6.	Permanent Address	:					
7. 8.	Date of Birth (Certificate mus supported) Whether SC/ST/OBC/Gen				Ag Ca		
9.	Marital Status	:	Marrie	ed / Unmarrie	ed		
10.	Educational Qualification	s :	(Certi	ficates in proc	of of qualifications	must be s	upported).
SN	EXAM. PASSED	GRADE		YEAR OF PASSING	BOARD / UNIVERSITY	SPEC	CIALIZATION

11.	Work Experience	(Certificates i	n proof	of experience mus	t be supported):
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Name of Employer	Post	From date	To date	Reason for leaving	
*					
			pe		
Total Experience gained after a	equiring the mir	nimum essential q	ualification (in	years):	
12. Details of NET/GATE/Nation	al level exams	passed, if any.			
Exam passed	Date of passing		Valid till		

				200	
13. If selected what period would	d vou require fo	or inining the post			
14. Have you ever been declare					
Service? Yes/No. If yes, de			пог арроппин	ent in any covt.	
D1		- £	f		
Declaration: I hereby declare that my knowledge and belief. Fur	nishing of fals	e information or	suppression		
disqualification and is likely to re	nder cancellati	on of my candida	ture.		
	Signature:				
Date:	Sig	gnature:			