Ap	plica	tion	No.	



## CSIR-INDIAN INSTITUTE OF INTEGRATIVE MEDICINE CANAL ROAD, JAMMU- 180 001

## $\frac{\textbf{INFORMATION ABOUT THE CANDIDATE APPEARING IN WALK-IN-INTERVIEW FOR}{\textbf{\textit{JUNIOR RESEARCH FELLOW}}}$

Advertisement No.07/2018	(A) Name of	the position				
Date of Interview :23.05.2018 Post Code					I	Passport
1. Name: Mr./Miss/Mrs./D	r. :				_   Siz	e photograph
2. Father's/Husband's Nar	ne :				_	
3. Date of Birth	:				_	
4. Address for communica	tion:					
5. Phone/Mobile No		6. E-ma	il I.D			
8. Details of Educational						
Examination	Subject		Board/University	,	Year	%age of marks
9. Computer Proficiency : 10. Category { SC/ST/OBO						
					ALL	
12. Previous experience in	CSIR-IIIM/CSIR I	Labs./Scient	ific Organizations et	c:		
Name of the Institute/Organization		ID No.	Designation	Fron	1	То
Experience : Years Months Days						

13. If you have any close relation w	vith CSIR-IIIM/CSIR employee please give his/ her Name and			
Designation:				
14. The source of information about	this Advertisement: CSIR- IIIM Website/ Newspapers (Please			
indicate:	).			
<b><u>DECLARATION</u></b> :-				
I hereby declare that the information given above is true and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect; my candidature is liable to be cancelled.				
Dated :	Signature :			

## NB: 1. Interim Enquires will not be attended to

2. Incomplete application will be rejected out rightly.