



Jawaharlal Institute of Post Graduate Medical Education and Research
(An Institute of National importance under the Ministry of Health & Family welfare,
Government of India)

Department of Microbiology
Indo-UK TB Project

**“Quantification of Immune Cell Types and Identification of Cell Type Specific
Biomarker Expression in Pulmonary and Extra- Pulmonary Tuberculosis Patients: a
pilot study”**

Application Form

1. Application for the Post of _____ Paste a recent passport size photo
2. Name of the Applicant (*in block letters*): _____
- _____
3. Father's/Mother's/Guardian's Name: _____
4. Date of Birth: _____ (dd/mm/yyyy)
5. AGE: Years _____ Months _____
6. Address for communication: _____
- _____
- _____
- Phone/mobile No: _____ Email: _____

7. Educational Qualifications (*from matriculation onwards, self-attested copies to be enclosed*):

Examination passed	Year of passing	University/Board	Division/Class	% of Marks*	Subjects

* convert CGPA into percentage

8. Details of Previous Employment (if any):

S. No	Employer	Designation	From	To	Duration	Nature of work

9. Reference letters / Testimonials:

10. Any other information relevant to the post (*if any*):

11. DECLARATION: I do hereby declare that the above information furnished by me are true and correct to the best of my knowledge.

Place: _____

Date: _____

(Signature of the Applicant)