# APPLICATION FORM

### Application for – iTAC Study – Research Lab Assistant Post,
### Department of Nuclear Medicine, JIPMER, Puducherry September 2022

**Name of the Post** ☐ **(1) Research Lab Assistant**

PHOTO

1. Name in Block letters :
2. Father/ Husband's Name :
3. Date of birth : D  D  M  M  Y  Y  Y  Y

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

4. Age :
5. Sex : Male ☐ , Female ☐ , Others ☐
6. Nationality :
7. **Address** for communication including Pin code, in caps with Telephone No:

_____

_____

_____

_____

Pincode: _____

Mobile Phone Number: _____

8. **Email Id**:_____

9. **Educational qualifications from matriculation/SSLC:**

| Sl. No | Educational Qualification (From SSLC/Matriculation) | Subject | Marks Obtained | Year of Passing | Name of the College, Board University |
|---|---|---|---|---|---|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4. | | | | | |

10. **Experience**

| Sl. No. | Office Address | Post Held | From | To | No. of years and months (Experience) | Regular/ Temporary/ Contract |
|---|---|---|---|---|---|---|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |

11. a. Mother Tongue: _____

    b. Other Languages known:     Reading     Writing     Speaking

      English    ☐    ☐    ☐

      Tamil    ☐    ☐    ☐

      _____    ☐    ☐    ☐

12. Why do you think you are the right candidate for the said post (*write briefly in English in own handwriting)*

13. Name, Address, Email ID & Mobile Number of two references:

14. List of attested copies attached along with application

    1. Aadhar Card (Identity Proof and Address Proof) ☐

    2. Age Proof (Birth Certificate/ 10th /12th Certificate with age) ☐

    3. Proof of Educational Qualifications    (10th) _____ ☐

            (HSC) _____ ☐

            (UG) _____ ☐

            (PG) _____ ☐

    4. Proof of Experiences ☐

    5. GCP Certification ☐

    6. No Objection Certificate from employer if working as a permanent employee ☐

### 15. Declaration

I _____ hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligible and detected before or after Exam/Interview, I hereby convey my consent for cancellation of my candidature. Further, I declare I have gone through all the terms and conditions of appointment. I will abide the same and I will not claim any regularization.

Place:                                              Signature of the Candidate:

Date: