**ICAR-National Research Centre on Litchi, Muzaffarpur**

**APPLICATION FORMAT FOR YOUNG PROFESSIONAL**

Affix your recent self attested colour photo here

Name of the position applied (Please tick mark in the box below):

**Young Professional-II [Research]**

**Young Professional-II [IT**]

**Young Professional-I [Research]**

1. Name of the candidate: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
2. Date of birth (as per class 10th Mark sheet/Certificate): \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
3. Father’s Name: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
4. Category (SC/ST/OBC/GEN/PWD): \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
5. Sex (Male/Female): \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
6. Married/Un-Married: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
7. Correspondence Address (with PIN Code) :

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ PIN \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

District: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ State: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Mob. No. \_ \_ \_ \_ \_ \_ \_\_ \_ Email \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

1. Permanent Address :

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ PIN \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

District: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ State: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Mob. No. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ Email \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

1. Educational Qualification(Starting from 10th onwards):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S.  N. | Examination Passed/Degree obtained | Name of the Board/University/  institution | Year of passing | Class of Division | % of marks/GPA | Subjects taken/ Specialization |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

1. Experience, if any (Starting from the present employment (Experience certificate needs to be attached):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.  N. | Name & Address of the employer | Post held/Nature of employment | Period | | Permanent/ Temporary | Salary & Grade Pay (in Rs.) | Nature of duties |
| From | To |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. List of documents attached (Self attested photocopies to be attached here):
2. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
3. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
4. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
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7. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
8. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
9. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_
10. **Declaration by Candidate**

I do hereby declare that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information found incomplete, false or incorrect or ineligibility being detected at any stage before or after interview/ selection, my candidature is liable to be rejected. I shall be bound by the decision of the Director, ICAR-NRCL, Muzaffarpur in this regard. After completion of project/tenure, I will not claim for regularization etc.

I also declare/ undertake that I am a citizen of India and I am not related to any of the staff member of the Institute/ I am related to Dr./Mr./Ms………………………………………………. Working as……………………………………………………………. and he/ she is my …….……………………………\*

(Note: If someone is related may be given in brief)

Dated: ……………………………..

Place: ……………………………… (SIGNATURE OF CANDIDATE)

\*(Strike off whichever is not applicable)

*(Put your signature with date on each page of the proforma after filling it and submit on the date of interview).*