

KRISHI VIGYAN KENDRA,
SANDAS KALA, MAHALGULARA, BURHANPUR (MP).450221

(To be filled by the Candidate)

Application Form for the post of Programme Assistant (Lab Technician)/T-4

Please affix your
latest passpost size
self-attested
photograph

APPLICATION FORM

Advertisement No. :

Date of Advt. :

Serial No. of Post :

Last date for Submission of Application form :

in age

Name of the Applicant :

Name of Post Applied for :

Father's/Husband Name :

Mother's Name :

Mobile/Telephone No. :

Email ID :

Name of Issuing Bank :

Branch :

Demand Draft No. :

Date :

Amount :

Signature of Applicant

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SANDAS KALA, MAHALGULARA, BURHANPUR (MP).450221

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photograph

- 1 Name (In Capital Letters) :
- 2 Date of Birth :
- Age in word(on last date for application)
- 3 Place of Birth :
- 4 Mother's Name :
- 5 Father's/Husband Name :
- 6 Address :
Correspondence :
- :
- :
- :
- :
- :
- :
- Permanent :
- :
- :
- :
- :
- 7 Nationality :
- 8 Sex : Male/Female/Transgender
- 9 Community/Category (Please : UR/OBC/SC/ST/EWS :.....
Strike out whichever options Sl. No of Proof enclosed (If belongs to Reserved
are not applicable Category)
- 10 Marital Status : Married/Unmarried/Divorced :.....
If married, name of spouse

11. Educational Qualification : Examination passed (please enclose copies of certificate/degree & Mark sheet/transcript etc of each of the examination

Sr. No.	Name of the Examination	Name of degree/ diploma	Uni./Board	% of Marks	Division Obtained	Year of Passing	Subject(s) (Major)	Enclosure Number	
								Certificate / Degree	Mark sheet / transcript
01	Secondary								
02	Senior Secondary								
03	Graduate								
04	Post Graduate								
05	Any Other examination(s)								
06	Degree/Diploma/certificate (with exact duration)								

- Only completed and awarded qualifications should be mentioned. Incomplete or result awaited qualifications should not be mentioned or clearly indicated

12. Experience Particulars of all previous and Present employment.

Sr. No	Name of the Employer	Name of the Post	Pay Scale / Salary	Period		Remarks
01						
02						
03						
04						
05						
06						

Declaration

I, Son/daughter of hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected before or after the Selection Committee and Board of Management meetings, my candidature/appointment may be cancelled by the Lok Mata Devi Ahilya Bai Holkar Social National Mission, Krishi Vigyan Kendra, Burhanpur. I have never been convicted or contemplated for any unlawful activity.

Signature of Applicant

Date :

Name as signed (In BLOCK LETTER)

EMPLOYER REMARKS

(For in service candidates only)

The application of Shri/Smt./Ku./Dr. Is holding a permanent/temporary post of in pay scale of Rs. From the period to and his/her basic pay is Rs. per month. His/her application is forwarded as he/she will be relieved in case of selection for the post applied. It is further certified that no vigilance case/any enquiry is pending against shri/smt/ku./Dr.....

Date :

Place :

Signature
Designation of the Officer
(With Seal)

Note :

1. The application form must be accompanied by the self address stamp envelop and crossed Demand Draft.
2. Send applications along with self attested copies of all relevant mark sheets, certificates and testimonials etc.
3. Incomplete applications or the applications received after the due date shall not be considered in any case.
4. Organization reserves all rights to fill or not to fill the post.

SUMMARY SHEET

(To be prepared and submitted in QUADRUPPLICATE (in 4 copies) in the format given below. No enclosures are to be attached to this sheet)

1. Name of the applicant :
2. Date of Birth :
3. Whether belonging to SC/ST/OBC ? If yes :
 mention name of the Caste/Tribe/
 Backward Class
- 4 Examination Passed Examination :

Name of the Examination	Name of degree/ diploma	Uni./Board	% of Marks	Division Obtained	Year of Passing	Subject(s) (Major)
High School						
Higher Secondary/ intermediate/ Pre University						
Bachelor's Degree						
Master Degree						
Doctor's Degree						
Any Other (Examination)						

- 5 Position held so far :

Name of Post	Organization and Address	Duration of appointment with dates	
		From	To
		D.M.Y.	D.M.Y.

- | | | |
|---|-----------|----------|
| 6 Number of Publications | Published | Accepted |
| i Scientific Paper | | |
| No. of Papers < 4 NAAS ratings | | |
| No. of Papers > 4 NAAS ratings | | |
| No of Papers without NAAS ratings | | |
| ii Extension Publication (booklets/bulletins) | | |
| iii Books No. of authored books | | |
| No of edited books | | |
| iv Manuals | | |
| v Book Chapter | | |
| vi Popular articles | | |

SIGNATURE OF CANDIDATE