



भौतिकी संस्थान, भुवनेश्वर
Institute of Physics, Bhubaneswar

The candidate should affix recent photographs duly signed (Half on application and half on Photographs)

APPLICATION FOR THE POST OF _____.

Advertisement Number: IOP/Recruit/_____/2018.

Last Date of Application: _____.

PART - A

A. PERSONAL INFORMATION :

1. Name in Full (Capital Letters) :

2. Father's / Husband's Name:

3. Address (Permanent) :

II. Address for Communication (Correspondence):

4. Telephone No.

Mobile No.																				
------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5. E-mail id :

6. Gender :

7. Marital Status :

8. Date of Birth
(dd/mm/yyyy) :

9. Category (SC/ST/OBC/Gen.) :

B. Educational Qualification : (attach separate Sheet, if required)

Exam Passed	Board / University	Year of Passing	Major Subjects

C. Work Experience : (from present to past – attach separate Sheet, if required)

Position held	Grade Pay / Level in the Pay Matrix	Organisation	From	To	Completed Years	Nature of Duty

D. Details Qualification / Knowledge / Experience in Computer Application

--

E. References :

Name, Designation, Place of Posting, Address & Phone Number of 1 st Reference	Name, Designation, Place of Posting, Address & Phone Number of 2 nd Reference

DECLARATION

I declare that the above information furnished by me is true and correct to the best of my knowledge and belief. In the event of any discrepancy arising due to any false or wrong information provided by me and traced later on, I shall be held responsible for the same and shall abide by the decision of the competent authority in the matter.

Place :

Date :

Signature of the Applicant

PART – B

(to be filled by the Office in which the candidate is working)

_____ (Name of the Organisation)

Certificate

1. *Certified that the information furnished by the candidate has been verified with the service records and found correct.*

2. *Certified that no vigilance case/ Criminal Case / Disciplinary Proceedings is either pending _____ or _____ in _____ force _____ against Shri/Smt./Kum._____.*

*(Name and Designation of the certifying Officer)
With Seal*