



NATIONAL AGRI-FOOD BIOTECHNOLOGY INSTITUTE (NABI)
 (Dept. of Biotechnology, Ministry of Science & Technology, Govt. of India)
 Sector – 81, Knowledge City, Mohali-140306.(Pb), INDIA
 Website: www.nabi.res.in

FORM OF APPLICATION FOR TECHNICAL POSITIONS

To be filled in by the candidate		For Office use
Advt.No. _____	Particulars of application fee (Rs.) _____	Application S. No:
Post applied for _____	Transaction ID/ UTR No./ _____ Date _____	Rectt. Section Date of receipt: _____
Post Code _____	Attach Proof of Transaction with this form	
	Name of the bank & Branch _____ _____	

Affix your recent coloured passport size photograph

- Name in full (IN BLOCK LETTERS)
(In the case of female candidate, the appropriate prefix 'Miss' or 'Mrs' should be used)
- Father's Name.....Mother's Name.....
Husband's Name.....
- Date of Birth (DD/MM/YYYY).....Place of Birth.....
Age as on **02nd March 2021**: yy.....mm.....dd.....
- Postal Address.....
.....
.....PIN CODE.....
Phone No :(with STD code).....Mobile No.....
E-mail
- Permanent Address.....
.....PIN CODE.....
- Are you a citizen of India by birth or by domicile?
- Name of State to which you belong:

7. State whether you are a member of Scheduled Caste / Other Backward Class. Attach an attested copy of the prescribed certificate in support of your claim, (Tick the appropriate Category)

SC
OBC

8. Are you related to any employee(s) of the DBT / NABI? If so, give details:

.....
.....

9. Educational/ Professional Qualifications:

<u>Exam. Passed</u>	<u>Division/ Grade & % age of marks</u>	<u>Year of Passing</u>	<u>Duration of the Degree, etc.</u>	<u>Board/Univ</u>	<u>Subject(s)</u>

10. Professional Qualification (e.g. knowledge of computer, etc.)

11. Details of employment (in chronological order):-

<u>Organization</u>	<u>Post Held</u>	<u>Scale of pay and last pay drawn</u>	<u>Exact dates to be given</u>		<u>Total period (in years)</u>	<u>Nature of duties</u>
			<u>From</u>	<u>To</u>		

12. Any additional qualification such as membership of professional societies; awards and honours etc.....
(Enclose a separate sheet, if the space is insufficient)

13. Time period required for joining:

14. Name and address of 3 referees (with email address)

1..... 2.....
.....
.....
3.....
.....
.....

15. Whether synopsis sheet has been enclosed and send through email to admnrectt@nabi.res.in (Y/N).

16. List of enclosures: 1.....
2.....
3.....
4.....

DECLARATION BY THE CANDIDATE

I, _____ hereby declare that the statements made in the application are true, complete and correct to the best of my knowledge and belief and in the event of any of the information being found false or incorrect or any ineligibility being detected before or after the selection, my candidature is liable to be cancelled and action taken against me. I also agree that NABI can contact any or all of the above three referees named by me and seek information in confidence. I am aware that NABI is free to act upon such information independently to judge my suitability for the post applied for.

Place:
Date:

Candidate's signature _____
Full name _____

Endorsement by the Head of the Department or Office

Candidate already in employment in Government Ministries/ Departments/Organizations/PSUs/Autonomous bodies/ Universities/Central & State Research Organizations should get the following endorsement signed by his/her present employer

No.

Date.....

Forwarded application of Dr./Shri/Ms _____
(Name & Designation).

It is certified that:

1. The information furnished by Dr./Shri/Ms.....has been verified from official records and found correct.
2. It is also certified that no disciplinary/departmental enquiry is either pending or contemplated against and that he/she is not undergoing any penalty.
3. His/Her integrity is certified.

Signature.....

Designation.....

Stamp.....