

राष्ट्रीय कृषि-खाद्य एवं जैवविनिर्माण संस्थान

NATIONAL AGRI-FOOD AND BIOMANUFACTURING INSTITUTE
(Formerly National Agri-Food Biotechnology Institute &
Centre of Innovative and applied Bioprocessing)
(Deptt. of Biotechnology, Ministry of Science & Technology, Govt. Of India)
Knowledge City, Sector-81, Mohali

Application Form for Walk in Interview

Sr. No.	Name of the Position	Post Code	Position applied for please mark ☑
1.	Project Manager (Administration)	1001	
2.	Project Manager (Finance)	1002	
3.	Technical Officer- II (Plant)	1003	
4.	Technical Officer-I (Plant)	1004	
5.	Project Scientist - I (Plant)	1005	
6.	Project Scientist - II (Plant)	1006	
7.	Research Associate - I (Plant)	1007	
8.	Technical Officer-I (ICT)	1008	
9.	Project Manager (Communications)	1009	

01	L. N	lame	ot	the	candio	date ((CAP	ITAL	ر،):
----	------	------	----	-----	--------	--------	------	------	------

02. Father/husband's name:

03. Mother's name:

04. Date of birth:

05. Age as on date of interview YY MM DD

06. Sex:

Paste recent passport size self-attested photograph. The signatures should be across the face of the photo so that half of them are on the application and the other half on the photo

08. Address:								
Perm	anent:							
Corre	spondence:							
09. Mob	ile No.							
10. E-ma	ail address:							
11. Natio	onalitv:							
12. Cates (Attache	gory SC/ST/OBed copy of certifi	C/General: icate in case of reserved cat	tegory)					
13. Educ	cational qualific	ation: (Starting from SSC/r	natriculation onwards)					
Sr. No.	Name of the qualification	Subjects (with specialization)	Name of the Board/College/University	Year of Passing	% Grade /CGPA			
1.								
2.								
3.								
4.								

07. Married /Unmarried:

5.

6.

14. Details	of Exp	perience
-------------	--------	----------

Sr. No.	Name of the Organizations	Position Held	Scale of pay and last pay drawn /Emoluments	Duration		Total Period	Nature Of duties
		Helu	/Emoluments	From (DD-MM-YY)	To (DD-MM-YY)		
1.							
2.							
3.							
4.							

1	_	D 1	1	/D
	5	Piin	lication.	Presentations:
1		ıuı	псаион	i i cochtationo.

16. Award & Fellowship, if any:

17. Name, designation with contact details (including email and phone no.) of three referees:
i.
ii.
iii.
18. Original mark sheets, certificates, award/fellowship, etc must be accomplished for verification at the time for interview and attach one set of attested copies of the documents with the application form.
I hereby declare that the above submissions are true and to the best of my knowledge and belief and nothing material has been concealed therein. In case any of the above are subsequently found false/untrue my employment shall stand terminated automatically.
Date: Signature of the candidate Place: