

## APPLICATION FORM

(For Project Associate I/JRF in DBT Funded Wheat Research Project)

### 1. Personnel details

Full Name	:	
Date of birth	:	
Age (as on 28-02-2023)	:	.....Years .....Months.....Days
Nationality	:	
Address for correspondence	:	..... ..... .....
Permanent Address	:	..... ..... .....
Mobile	:	
Email	:	



### 2. Educational Qualification (attach self-attested documents)

S. No	Name of qualification	Name of board/university	Year of passing	Marks obtained (out of total)	OGPA/percent marks	*Weightage score
1.	Ph. D					
2.	M. Sc.					
3.	B. Sc.					

\* Weightage Score:  $(OGPA/10) \times \text{weightage}$  OR  $\text{Weightage Score} = (\text{Percent marks}/100) \times \text{weightage}$

\* Weightage for PhD is 10; for M.Sc & B.Sc is 20 each

### 3. Desirable qualification

NET qualification (if yes, attach self- attested copy)	:	
--	---	--

#### 4. Desirable experience

S. No.	Organisation/ Research project	Designation	From	To	#Details of experience of Field-based crop data collection and statistical analysis
1.					- Name of crop: - Type of data collected: - Type of statistical analysis carried out:

# Please add more rows if needed

#### 5. Research Publications :

S. No	#Title of publication	Authors	NAAS rating (2022)
1.			

# Please add more rows if needed

#### 6. Details of conferences/symposia/workshop (Oral/poster presentations)

S. No	# Name of conferences/symposia/ workshop	Dates and duration	Whether Oral/poster presentation
1.			

# Please add more rows if needed

#### DECLARATION

I hereby declare that I have carefully read the instructions and particulars and that the entries made in this application form are correct to the best of my knowledge and belief. If selected, I promise to abide by the rules and discipline of the Institute. I note that the decision of the Institute is final in regard to selection for temporary position of research project. The Institute shall have the right to expel me from the Institute at any time after selection, provided if it is satisfied that I was selected on false particulars furnished by me or my antecedents prove that my continuance in the Institute is not desirable. I agree that I shall abide by the decision of the Institute, which shall be final.

Place : .....

Date : .....

Signature of the Applicant