|  |  |  |
| --- | --- | --- |
| No. of advertisement \_\_\_\_\_\_\_\_\_\_ & date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Post applied for** -  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | logo | e-Transfer transaction  ref. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of transaction \_\_\_\_\_\_\_\_\_\_\_  Or  D.D. No. & Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Valid till \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

##### NATIONAL COUNCIL OF SCIENCE MUSEUMS

*Recent passport size photograph*

*of the candidate.*

**GOVT. OF INDIA**

Block-GN, Sector-V, Bidhan Nagar, Kolkata – 700 091

Form of application for the use of candidates for appointment by Selection

*(To be filled in candidates’ own handwriting and forwarded to the above address)*

|  |  |  |
| --- | --- | --- |
| 1. Post applied for: | | |
| 2. Name in full (in Block letters) | | |
| 3. Address: | a) Present |  |
| b) Permanent |  |
| c) Email ID |  |
| d) Mobile No. |  |
| 4. Date and place of birth: (i) Date :  (ii) Place : | | |
| 5. Are you (a) a citizen of India by birth and/or by domicile? YES/NO  OR  (b) a person having migrated from Pakistan or YES/NO  Bangladesh or other countries with the inten-  tion of permanently settling in India or a  subject of Nepal? | | |
| 6. Name of the State to which you belong: | | |
| 7. Father’s /Husband’s Name :  Occupation :  Address : | | |
| 8. Is (or was) your father:   1. citizen of India by birth and/or by domicile? YES/NO 2. A person having migrated from Pakistan or Bangladesh or YES/NO   other countries with the intention of permanently settling  in India or a subject of Nepal? | | |
| 9. State your   |  |  |  | | --- | --- | --- | | A | Religion |  | | B | Are you a member of Schedules Caste or Tribal or Aboriginal Community or Backward Class? Answer ‘Yes’ or ‘No’ and if the answer is ‘Yes’ give particulars and attach a certificate from the Regional Authorities in support of your claim | YES/NO | | C | Are you an Anglo Indian? | YES/NO | | D | Are you physically handicapped? If yes, give details | YES/NO | | | |

(2)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 10. Aadhar No.: | | | | | | | | | | | |
| 11. PAN no./Passport no.: | | | | | | | | | | | |
| 12. | Particulars of Educational Qualifications i.e. all Examinations passed and degrees and technical qualifications obtained at the University or other places of higher technical education including Stenography/Typing etc.(Enclose all relevant documents commencing with the Secondary or equivalent examination onwards.) | | | | | | | | | |
| Examination/  Degree/ Diploma | | Name of Board/ University | | | Percentage of Marks obtained | | Class or  Division obtained | Major subjects taken | | Year of passing |
|  | |  | | |  | |  |  | |  |
| 13. | Any additional qualifications/Membership of Scientific Societies may be mentioned here | | | | | | | | | |
| 14. | What language (including Indian Languages) can you read, write or speak. Give particulars and state any examinations passed in each language. | | | | | | | | | | |
| Read only | | | Speak only | Read & Speak | | Read, Write and Speak | | | Examination passed | | |
|  | | |  |  | |  | | |  | | |

(3)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 15. | Details of current & previous employment. Give particulars below along with testimonials. | | | | | |
| Name of Organization | | Date of Joining | Date of Leaving | | Designation & Nature of work | Salary & Grade |
|  | |  |  | |  |  |
| 16. | Are you employed in a Govt. / PSU/ Autonomous organization at present? (Answer ‘Yes’ or ‘No’. If Yes, the application has to be routed through proper channel) | | |  | | |
| 17. | Are you willing to accept the minimum initial pay offered? If not, state what is the lowest initial pay that you would accept in the prescribed scale | | |  | | |
| 18. | If selected, how much time would you require to join? (Give tick mark) | | | Immediate/one month/ Two months /three months | | |
| 19. | Preference of Examination Centre (Mention 1st, 2nd, 3rd, 4th in the box)    a) Kolkata b) Mumbai    c) Delhi d) Bangalore | | | | | |

(4)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 20. | Reference:  (They should be residents in India and holders of responsible positions. They should be intimately acquainted with the applicant’s character and work but must not be relations. When the candidate has been in employment, he/she should either give his/her present or most recent employer or immediate superior as referee or produce testimonial from him/her in regard to the candidate’s fitness for the post for which he/she is an applicant) | | | | |
| (i) | Name | **:** | | |
| Occupation or position | **:** | | |
| Address with e-mail | **:** | | |
| (ii) | Name | **:** | | |
| Occupation or position | **:** | | |
| Address with e-mail | **:** | | |
| 21. | List of enclosures: | | | | |
|  | 1. |  | | 4. |  |
| 2. |  | | 5. |  |
| 3. |  | | 6. |  |
| 7. |  | | 8. |  |
| 9. |  | | 10. |  |
| **Declaration:** I (Name …………………………………..) hereby declare that information provided in this application are true to the best of my knowledge and belief. In case the information provided by me is found to be false or the material facts are concealed by me at any stage i.e. during processing of my application or even after my joining in the Council, my candidature will be cancelled and my service may be terminated, if appointed.  Date-------------------------------- Candidate’s signature ----------------------------  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place ------------------------------- Name of the candidate in CAPITAL LETTER | | | | | |
| Candidate already employed should get the following endorsement signed by his/her present employer.  **ENDORSEMENT BY THE HEAD OF THE DEPARTMENT OR OFFICE**  No.---------------------------------- Date ----------------------------------------------    Full signature -------------------- Designation --------------------------------  Name & Address of Office with seal ………………………………………………….  -----------------------------------------------  ----------------------------------------------- | | | | | |

Note:- Any change of address given in Col. 2 above should at once be communicated. Candidates must arrange for the re-direction of communications to their new addresses.