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| National Museum Institute | NATIONAL COUNCIL OF SCIENCE MUSEUMS **Ministry of Culture, Govt. of India**  Block-GN, Sector-V, Bidhan Nagar, Kolkata – 700 091 | National Council of Science Museums, Kolkata, India — Google ... |

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| Form of application for the use of candidates for engagement of **Technical Assistant (Civil) on contract basis for a period of one year or co-terminus of the project.**  *(To be filled in candidates’ own handwriting and forwarded to the above address)* | *Recent passport size photograph*  *of the candidate* |

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| 1. Name in full (in Block letters) | | |
| 2. Address: | a) Present |  |
| b) Permanent | ` ` |
| c) Email ID |  |
| d) Mobile No. |  |
| 3. Date and place of birth: (i) Date :  (ii) Place : | | |
| 4. 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? | | |
| 5. Name of the State to which you belong: | | |
| 6. Father’s Name :  Address :  Occupation : | | |
| 7. 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? | | |
| 8. 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 | | | |

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| 9. Aadhar No.: | | | | | | | | | | | |
| 10. PAN no./Passport no.: | | | | | | | | | | | |
| 11. | Particulars of all Examinations passed and degrees and technical qualifications obtained at the University or other places of higher technical education (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 |
|  | |  | | |  | |  |  | |  |
| 12. | Any additional qualifications/Membership of Scientific Societies may be mentioned here | | | | | | | | | |
| 13. | 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 | | |
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| 14. | 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 |
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| 15. | 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 engagement may be ceased without any reference to me, if appointed.  Date-------------------------------- Candidate’s signature ------------------------------  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place ------------------------------- Name of the candidate in CAPITAL LETTER | | | | |

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.

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