**FORMAT OF APPLICATION**

**(APPLICATION FOR THE POST OF DIRECTOR, CDFD, HYDERBAD,**

**Advertisement No. 01/2020**

1. Name of the applicant (In Block Letters) ………………………………….

Affix Passport Size Photograph

………………………………………………………………………

1. Father’s / Husband’s Name ……………………………………..

………………………………………………………………………

1. Date of Birth (DD/MM/YY) ……………………………………….
2. Postal address:

………………………………………………………………………

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……………………………………………………………………..

PIN…………………………………………………………………

E-mail………………………………………………………………

Telephone ………………………………………………………..

1. Permanent Address:

…………………………………………………………………………………………

…………………………………………………………………………………………

…………………………………………………………………………………………

PIN ……………………………………………………………………………………

1. Nearest Railway Station / Airport: …………………………………………………
2. Nationality: …………………………………………………………………………..
3. Marital Status: ………………………………………………………………………
4. Whether belongs to SC/ST/PH/OBC (if yes, attach certificates): ………………
5. Educational qualification (from matriculation onward):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Degree | Board/University | Division | Year of Passing | Subjects |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Contd…2

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1. Experience (from current to oldest):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | From | To | Name of Organization | Position held | Scale of Pay |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. Professional training undergone, if any, and details thereof: ……………………

…………………………………………………………………………………………..

1. Honors / Awards / Fellowship received: ……………………………………………
2. Total Research / Academic experience (Years / Months): ………………………
3. Details of research work: …………………………………………………………....

………………………………………………………………………………………….

1. Detailsof publications with impact factors (a list of publications may be provided) with H Index:
2. Details of patents granted: ………………………………………………………....
3. Details of technology transferred / developed: …………………………………..
4. Any other relevant information that you may like to furnish: ……………………

…………………………………………………………………………………………

Note: Please attach separate sheets wherever necessary.

**Signature of the Candidate**

Place:

Date: