REGIONAL AYURVEDA RESEARCH INSTITUTE FOR SKIN DISORDERS

New Rajeev Nagar, Payakapuram Vijayawada-520015 (A.P.)

APPLICATION FOR THE POST OF

1.	Name	in full	(In	Block	letters):	

2. Father's/ Husband Name:

3. Present Address for : communication with pin-code email id and mobile no.

4. Date of Birth

5. Age as on 01.01.2016

years

months

days

6. Sex

7. Nationality

8. Whether SC/ST/OBC/PH/: GEN/Ex- Serviceman?

9. Educational Qualification (s)

(From Class X / H.Sc. Onwards)

S. No		Year of	Name of Board/University/	Details of Marks Obtained			
110	the exam	passing	Institute	Maximu m marks	Marks obtained	% of Marks	
1							
2			4				
3							

Affix passport size photograph

10. Technical Qualification:

S.No.	Name of the	Year	Name of Board/	Details of Marks Obtained		
	exam	of passing	University/Institute	Maximum marks	Marks obtained	% of Marks

1. Experience, if any:

	S.No.	Name of the Institution	Post held	Nature of work performed	Duration		
					From	То	

I solemnly declare that the statement made by me are correct to the best of my knowledge and also clearly understand that in the event of my appointment in Regional Ayurveda Research Institute for Skin Disorders , Vijayawada my services are liable to be terminated without notice, if the information furnished by me is found to be wrong or suppressed.

Dated:

Place:

VIJAYAWADA SKIN DIS STANDING SKIN DIS SKIN DIS STANDING SKIN DIS S

Signature of the applicant