

Last Date for Receipt of Application: 30 days from the date of Advt. published in Employment News
CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES
No.61-65, INSTITUTIONAL AREA, OPP. 'D' BLOCK,
JANAKPURI, NEW DELHI-110 058

कैसान श्रीनिवास मूर्ति आयुर्वेद एवं सिद्धा औषद विकास अनुसंधान संस्थान
CAPTAIN SRINIVASA MURTI RESEARCH INSTITUTE FOR AYURVEDA AND SIDDHA DRUG DEVELOPMENT

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APPLICATION FORM

1. Name of the post applied for: _____

Advertisement No: _____

2. Name & Address: _____

(in block letters) _____

Ph/Mobile No.: _____

3. Date of Birth: _____

(in Christian Era):

4. Sex: Male: ☐ Female: ☐

5. Community (GEN/SC/ST/OBC/PH): _____

6. Educational Qualification (Starting from High School):

S. No	Examination passed	Year	Name of the School/College/University	Subjects	Division

7. Experience (Academic/Research)

S.No.	Name of Post	Scale of Pay	Name of the Department	Period		Nature of Work
				From	To	

Details of Enclosures:
(Put page nos. on all enclosures)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

I hereby declare that all statements made in this application are true and complete to the best of my knowledge and belief. I understand that action can be taken against me by the Council if I am declared to be guilty of any type of wrong information mentioned herein.

(If employed) I have informed by Head Office/Department in writing that I am applying for selection to the post.

(Cross if not required)

Signature of the Candidate
Name _____

Date:

Place: