

**NATIONAL AYURVEDA RESEARCH INSTITUTE FOR
VECTOR BORNE DISEASES
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.

Affix recent attested
passport size
photograph

4. Date of Birth :
5. Age as on 18.01.2016 : years months days
6. Sex :
7. Nationality :
8. Whether SC/ST/OBC/PH/ :
GEN/Ex- Serviceman?
9. Educational Qualification (s) : (From Class X / Intermediate/ H.Sc. Onwards)

S. No	Name of the exam	Year of passing	Name of Board/University/Institute	Details of Marks Obtained		
				Maxi mum marks	Marks obtaine d	% of Marks
1						
2						
3						
4						

Contd...



: 2 :

10. Technical Qualification:

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

11. Experience, if any:

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

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 National Ayurveda Research Institute for Vector Borne Diseases , 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:



Signature of the applicant