

# M.S. Regional Ayurveda Research Institute

(Under C.C.R.A.S., Ministry of AYUSH, Government of India)

Indra Colony, Banipark, Jhotwara Road, Jaipur – 302016

## Application Form

- Name of the post applied for \_\_\_\_\_
- Name of Candidate \_\_\_\_\_  
(In Block Letters)
- Father's Name \_\_\_\_\_  
(In Block Letters)
- Address (with Pin Code) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Email Id. \_\_\_\_\_ Mobile No. \_\_\_\_\_
- Date of Birth \_\_\_\_\_
- Sex Male  Female
- Category (Whether SC/ST/OBC/Others) \_\_\_\_\_
- Details of Educational Qualifications

A recent  
passport size  
photograph to  
be affixed in  
this space

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

10. Experience (Academic/Research)

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

11. Specialisation, if any \_\_\_\_\_

12. Details of Enclosures: -

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_
- e) \_\_\_\_\_

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 Institute if I am declared to be guilty of any type of misconduct mentioned herein.

Signature of Candidate

Name \_\_\_\_\_

Date: