

**Regional Ayurveda Research Institute for Drug Development
Aamkho, Gwalior - 474 009 (M.P.)**

BIO-DATA CUM APPLICATION FORM

Paste
recent
photograph

Name of the Post Applied: _____

1. Name and Address of the Candidate: _____

2. Telephone/Mobile No: _____ Email: _____

3. Father's Name: _____

4. Gender (Male/Female): _____

5. Date of birth: _____ Age: _____

6. Caste (SC/ST/OBC/General): _____

7. Educational Qualification: (Starting from XIIth Onwards)

Name of Course	Year of Passing	% of marks	College/University	Subjects

8. Research Experience

Name of Organisation	Length of service	Remuneration

9. Research papers published (No. only): _____

10. Training/Workshops/Seminar/Conference attended (No. only): _____

11. Present status/occupation: _____

12. Any other information: _____

Declaration: I hereby declare that the above information is true to the best of my knowledge and no information is concealed.

Date:
Place:

Signature of the Candidate