

**CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES**  
(MINISTRY OF AYUSH) 61-65, INSTITUTIONAL AREA, "D" BLOCK JANAKPURI,  
New Delhi

Form No:

Photograph
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**DETAILS FOR ISSUING OF IDENTITY CARD FOR SERVING EMPLOYEES**

1.	Officer/Employee Name	
2.	Father's / Husband Name	
3.	Sex: Male/Female	
4.	Post Held	
5.	Nature of Post (Regular/Temporary/Outsourced)	
6.	Employee Code No.	
7.	Date Of Birth	
8.	Date of Retirement	
9.	Residential Address	
10.	Telephone No./Mobile No.	
11.	Blood Group	
12.	Email Address	
13.	Specimen Signature	

**Dated:**

**Signature:**