

VANAVARAYAR INSTITUTE OF AGRICULTURE Manakkadavu, Pollachi - 642 103

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VANAVARAYA INSTITUTE OF AGRICUL ENRICHING INDIA			Job	Applica	tion Form				
Position Applie	ed for			ir	n the depar	tment	of		
1. Applicant	Informa	tion					L		
Name (in Block Letters)			DoB Age (DD/MM/YYYY) (in Yrs)				Photo		
								(Affix here)
Gender	Gender Marital Status Community			Caste					
Male	Single		FC BO	C MBC	SC				
Female	Marrie	ea							
	Address f	or Commu	nication			Pe	ermanent /	Address	
	Б	Pin code					Pin code		
	Г	iii code							
E. Mail id:					Mobile No	D:		Landline	e(with code)
Father / Name					Mother/	Nam	me		
Husband's	Occupat	tion			Wife's	Occu	pation		
Language Kno	own	Read	Write	Speak	Area of wo	ork / Int	erest in Te	eaching /	Research
2. Education	1		•						
Name of the Degree	ne		Studied / ity & Place	Sp	pecialization	*	Month & year of Passing	% of Marks	Part Time / Full Time /
UG :									
PG:									
Research: (Ph.D)									
Other Qualification (if any) *Give Specification		Λ arosom:-/	Dothology	\					

	a) PG (& Specializati) of thesis:	ons:				
	ii) Spec	ialization:					
) If thesis:					
	ii) Spec	ialization:					
4. N	IET Qualifi	cation:					
Name of Examination		Year of passing	,	Subject		% of marks	
5. E	xperience						
	Experience No. of in years		From	То	Position / Title	Name of Institution/ Others	
	Teaching						
	Others						
(At	ttach separat	e sheets if nece	essary):	1	-		
6. R	Research						
No. of Papers Published in Journal		Pres Conf	of Papers sented in ference / eminar	Seminar / Regiona	onference / FDP/ STTP at I / National / national	No. of Schemes on Funds Obtained from external	
	National	International	National	International	Organized	Attended	agency for research
(C	Sive details	separately in A	\nnexures)				
		p in Professio		:			
		e presently w		tion			
		st (Designation	_				
J. 1		Basic pay / mo	-	: Rs.			
		Total Emolume	ents	: Rs.			

: Rs.

10. Pay Expected at Our Service

11. Joining time required, if selected	ed :
2. Reference:	
(i)	(ii)
3. Any other information the applic	cant wishes to state:
# All the fields are compulsory.	
Place :	
Date :	Signature of the Applicant