

APPLICATION FORM FOR THE POST OF LABORATORY TECHNICIAN FOR A PERIOD OF 1 YEAR (12 Months) ON CONTRACT BASIS UNDER STATE- VIRAL RESEARCH DIAGNOSTIC LABORATORY (VRDL),
AIIMS, RAIPUR, CHHATTISGARH

Name of the post applied for:-_____

Affix
Passport Size
self- attested
colour
photograph
here.

1. Name of the Project:- STATE-VRDL, AIIMS, RAIPUR, CHHATTISGARH.

2. Name in block letters:-

[illegible]

3. Father/Husband's Name in block letters:-

[illegible]

4. Postal Address:

[illegible]

State :-

Pin :-

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Contact Number:-

[illegible]

5. E-mail ID :-

6. Permanent Address :

[illegible]

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State:-

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Pin :-

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Contact Number:-

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7. Date of Birth with
documentary evidence:

Date	Month	Year

8. Category: UR/OBC/SC/ST

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9. Gender:- Male Female

10. Educational Qualifications:-

Name of the Examination	Subject/ Discipline	University/ Institute/ College	Year of Passing final examination	Marks Obtained (Percentage)

11. Work Experience if any:-
Attach annexure

12. If selected what period would you require for joining the post:

I solemnly affirm that the information furnished above is true and correct in all respects to the best of my knowledge. I have not concealed any information. I undertake that any information furnished herein if found to be in correct or false, then I shall be liable for action as per rules in force.

Name of Candidate:

Signature of Candidate:

Date

Place:-