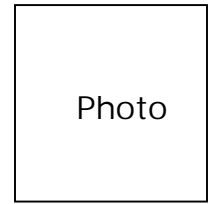


Application Form for Ayurved Expert



NAME OF DEGREE (WITH ABBREVIATIONS)

NAME OF APPLICANT
(in block letters)

FATHER'S/HUSBAND'S NAME

DATE OF BIRTH

(As per matric certificate)

POSTAL ADDRESS

PERMANENT ADDRESS

NATIONALITY

CATEGORY

ACADEMIC QUALIFICATION

DETAILS OF U.G. QUALIFICATIONS :-

NAME OF DEGREE (WITH ABBREVIATIONS)	NAME OF THE COLLEGE	AWARDING BODY	YEAR OF PASSING	AGGREGATE PERCENTAGE

DETAILS OF P.G. QUALIFICATIONS :-

NAME OF COURSE	NAME OF THE COLLEGE	AWARDING BODY	YEAR OF PASSING	NAME OF THE SUBJECT	AGGREGATE PERCENTAGE

DETAILS OF EXPERIENCE

NAME OF POST	PAY SCALE	NATURE OF DUTIES	DETAILS OF DURATION

I certify that above information are true and nor any relevant to information has been hidden.

Dated: _____

Signature of Applicant

Attested documents of qualification and experience should be attached.