

NATIONAL AGRI-FOOD BIOTECHNOLOGY INSTITUTE

&

CENTER OF INNOVATIVE AND APPLIED BIOPROCESSING

BE INDIA *

(Deptt. of Biotechnology, Govt. of India)

Knowledge City, Sector 81, S.A.S. Nagar, Mohali 140306, Punjab, INDIA

Website: www.nabi.res.in; www.ciab.res.in

Tel. No. 0172-5221109

Advt No. NABI/4(10)/2010-Adhoc

<u>Position</u>	For Office use
	Application S. No:
Part Time Doctor	
	Date of receipt:

- 01. Name of the candidate (CAPITAL):
- 02. Father/husband's name:
- 03. Mother's name:
- 04. Date of birth:
- 05. Age as on **30th May, 2017:**
- 06. Sex: 07.Married /Unmarried:
- 08. Address with phone and mobile numbers:

 Permanent:

Correspondence:

09. E-mail address:

Paste recent passport size self-attested photograph. The signatures should be across the face of the photo so that half of them are on the application and the other half on the photo

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11. Laucational qualification	11. Educational	l qualification	n
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Qualification	Name of the University/ Institute	Marks obtained	<u>% / Grade</u>	<u>Year</u>

12. Experience:-

Sr No.	Organization/Hospital/ Clinic/Medical Centre	Period From	<u>Period To</u>	Total Years and Months

13. Self-attested copies of qualification and experience should be enclosed.

I hereby declare that the above submissions are true and to the best of my knowledge and belief and nothing material has been concealed therein. In case any of the above are subsequently found false/untrue my employment shall stand terminated automatically.

Date:	Signature of the candidate
Place:	