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| **APPLICATION FORM****Advt. No. SACON/RES/RCTMT-ADVT-03/2021** | Affix recent Passport size Photograph |
| Please fill this form & send a clear scanned PDF copy of the form and attachments\* by e-mail to **recruitments@sacon.in with a CC to rcsacon@gmail.com.**  |
| 1. Name of the Project Applied for : |
| 2. Position applied for : |
| 3. **Full name of the applicant** : |
| 4. Gender (Male / Female) :  |
| 5. Date of birth (dd/mm/yyyy) : |
| 6. Age (as on 24-Dec-2021) : …………….……Years &…………….……Months |
| 7. Whether belonging to SC/ST/OBC ?  |  |
| 8. If belonging to SC/ST/OBC, state name of the Caste/Tribe :(*A photo copy of the original caste certificate issued by competent authorities may be attached*.) |
| 9. Present Postal Address with *Pin Code:* | 10. Permanent Residential Address: |
| 11. *Telephone Nos* | a) Mobile: b) Land Phone: |
| 12. *e-mail ID* : |  |
| 13. Academic Achievements |
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| **Examination Passed** | **Year** | **University** | **Subject** | **Percentage of marks obtained** |
| Bachelor’s Degree |  |  |  |  |
| Master’s Degree |  |  |  |  |
| PhD Degree |  |  |  |  |
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| 14. Are you NET/ GATE Qualified?: (If Yes, attach copies of relevant supporting documents) |
| 15. Creative Achievement (State briefly your bio data as research worker/giving details of research papers, participation in Seminar, Symposium, Conference, etc.). **Furnish this information in a separate sheet** |

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| 16. Have you received any scholarship/fellowship? (*If so, please give details*)  |
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| **Name of the Scholarship** | **Awarding Agency** | **Period****(From - To)** | **Amount** |
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| 17. Employment held so far (up to date): |
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| **Name of the Employer** | **Position held** | **Period****(From - To)** | **Emoluments per month** |
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| 18. Number of Research publications authored by you a) In Scientific Journals :b) In Seminar/Symposium/Workshop/Conference Proceedings : (*Detailed list with Authors, Ttitle of the publication, year of publication, journal, etc., should be given in a separate sheet along with copies of Cover/ title pages of all publications*) |
| 19. Number of Seminar/Symposium/Workshop/Conference attended: |
| 20. Extracurricular activities. *(Attach Copies of relevant Certificates*)a) Participated in Games/Sports/Trekking/NSS/ NCC etc. ? : Yes / Nob) Participated in Literary and cultural activities? : Yes / No |
| 21. Give a note on National Parks, Sanctuaries & Forest areas visited by you and a paragraph on self interest in the field of Wildlife Conservation & Research (**attach a separate sheet**) |
| 22. Give name, Address, e-mail id and Phone Numbers of three referees: |
| a) | b) | c) |
| 23. Covid Vaccination dates:  First dose: ………………………………….. Second dose…………………………………….. Certified that information furnished above are correct to the best of my knowledge. |
| **Place:** **Date: (Signature of the Applicant)** |