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| download **वि. सं. : 03/2019**  **भौतिक अनुसन्धान प्रयोगशाला के**  **उदयपुर सौर वेधशाला, उदयपुर एवं माउंट आबू अवरक्त वेधशाला, माउंट आबू में कार्यालय प्रशिक्षु हेतु आवेदन**  **ADVT. NO.: 03/2019**  **Application for Office Trainee at Udaipur Solar Observatory, Udaipur / Mt. Abu Infrared Observatory, Mt. Abu of Physical Research Laboratory** | | (passport size color photograph) |
| Have you availed / availing similar traineeship at PRL or its observatories **YES / NO** | | |
| **Full Name :** |  | |
| **Father's Name** : |  | |
| **Category** |  | **Physically Handicapped Category (40% disability and above)**  **YES/NO** |
|  | (SC/ST/OBC/UR) |  |
| If belongs to reserved category/PWD category, seeking age relaxation, please enclose copy of latest caste/PWD certificate in the prescribed proforma, issued by appropriate authority. Refer our web site [www.prl.res.in](http://www.prl.res.in/) (🡪Opportunities🡪Job vacancies) for prescribed proforma. | | |

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| **Gender :** |  | **Marital Status** : | | |
| **Date of Birth (DD/MM/YYYY)**  **(enclose documentary evidence)** | | | | |
| **Address for Correspondence/**  **Communication** | State :  Pin Code: | | **Permanent Address** | State:  Pin Code: |
| **E-Mail address:** | | | **Nearest Railway Station** | |
| **Telephone No.** | | | **Mobile No.** | |

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| **Educational Qualifications *(Write Degree/ Diploma name specifically at the space provided at first column of each row)*** |
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| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Exam Passed** | **Year of Passing** | **Board/ University/ Institute** | **Total Marks** | **Marks obtained (Give equivalent Marks in case of Grading system or any other system followed)** | **Percentage or give equivalent conversion to Percentage** | **Subjects** | | **QUALIFYING EXAMS** | | | | | | | | **Graduate in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  | | **Certificate/ Diploma in Computer Applications** |  |  |  |  |  |  | | ***OTHER QUALIFICATIONS*** *(Please do not repeat the qualification/s already provided above )* | | | | | | | | **SSC/ 1Oth** |  |  |  |  |  |  | | **HSC/ 12th** |  |  |  |  |  |  | | **Others** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | | **Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  | |

**(Enclose documentary evidence Degree certificate/mark sheet of each semester/year of the education qualification information as provided above)**

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| **Do you possess 55% in qualifying examination?** YES / NO |

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| **Experience Details Please provide details in chronological order starting from present/latest job** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Name of the Employer with Full address** | **Whether central/State /PSU/PSE Autonomous /Private LTD./ Other(Pls specify)** | **Post held** | Adhoc\ Regular\ Temp\ Contract | **From (dd-mm-yyyy)** | **To (dd-mm-yyyy)** | **Total Period of Service  Year Month** | **Scale of Pay** | **Total Salary Drawn** | **Nature of Duties** | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | | **If required enclose additional sheet in the same format** | | | | | | | | | | |

**(Enclose documentary evidence pertaining to each entry)**

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| |  | | --- | | **Two References (with full address and contact numbers):** | | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Contact Number :   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Contact Number : | | **If selected minimum time required to join USOOB / MIRO:** | |  | | **Any Other relevant information :** | |  | | |
| I hereby certify that the fore-going information is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. In case I have given wrong information, or suppressed any material fact or factual information, then my selection is liable to be terminated, without giving any notice or reason therefore. I am not aware of any circumstances which might impair my fitness for employment. I also undertake that, I am possessing all the relevant certificates/documents issued by relevant competent Authority on the date of submitting application. | |
|  | |
| **Place** | Signature of Candidate |
| **Date of Application :** | **Name:** |