ICMR | **NIN**
INDIAN COUNCIL OF | NATIONAL INSTITUTE
MEDICAL RESEARCH | OF NUTRITION

DRAFT ONLINE APPLICATION FORMAT

Application Number: _____

Important: All columns to be filled. Incomplete application will be summarily rejected.

Photo
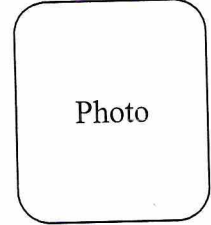
Personal Details:

Name of the candidate*_____

Relation Type* S/o, D/o, W/o*_____ (drop box to be provided)

Social Status (Category)* OBC/EWS/SC/ST/UR_____ (drop box to be provided)

Gender* Male/Female/others (drop box to be provided)

Mobile Number*_____

Email id*_____

Date of birth*_____
(Age proof document to be attached i.e., birth certificate Or educational qualification certificate possessing DOB)

(Note: Age calculation will be as per DoPT Order & to be calculated as on the last date of receipt of application) –

(Details will be provided to the firm at the time of designing the online application)

(After fulfilling the eligibility age criteria, the applicant may be provided access to register and for payment of application fee)

Post Details:

Post applied for*_____ (drop box to be provided)
(LDC/UDC/stenographer/Personal Assistant/ Library Clerk / Library & Information Assistant)

Post Code* _____ (drop box to be provided)

Essential Educational qualification*_____ (drop box to be provided)
(documents to be attached)
LDC:
UDC:
Stenogrpher:
Personal Assistant:
Library Clerk:
Library & Information Assistant

Technical Qualification*: _____ (drop box may be provided)
(Documents to be attached)

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Typing Certificate issued by Concerned State Technical Board
PGDCA Or any other Computer course Certificate from a government recognized Board Or Institute
Stenography lower (80 wpm) certificate issued by concerned State Technical Board
Stenography higher (120 wpm) certificate issued by concerned State Technical Board

Nationality / Citizenship

Nationality / Citizenship* Yes / No (drop box may be provided)

Central Govt. Civilian Employees:

Are you Central Govt Employees*: Yes / No. (drop box to be provided)

Ex-servicemen:

Ex-servicemen: Yes/No (Drop box to be provided)

Person with Benchmark Disability:

Person with Benchmark Disability*: Yes/ No. (drop box to be provided)

Type of Disability: * _____ (to be filled by the candidate)

Disability Percentage*: _____ (to be filled candidate)

Do you require a Scribe*: Yes/No (drop box to be provided)

Address:

H.No./Door No./Flat No* _____

Street/colony/Village* _____

Post Office* _____

City / District*_____

State*_____

Pin Code*_____

Details of Educational qualification as per notification*: (Mandatory to be filled by the candidate)

Name of the Examination Passed*: _____

Subjects*: _____

Name of the Board / University*: _____

Month & year of passing*_____

Percentage of marks Or GPA/CGPA*_____

Details of Technical Qualifications*: (Mandatory to be filled by the candidate)

Name of the Examination Passed*: _____

Subjects*: _____

Name of the Board / University*: _____

Month & year of passing*_____

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Percentage of marks Or GPA/CGPA*_____

Experience as notified for the post applied for* (certificate to be uploaded)

Name and address of the Employer*_____

Post held*_____

Nature of employment/work*_____

Period* From_____ To _____

Salary / last pay drawn (Basic Pay) * _____

Reason for leaving the present job_____

*In case of Govt. Civilian Employees (Central / State / UT / Autonomous / PSU / Statutory body etc. organizations "NO OBJECTION CERTIFICATE IS MANDATORY) **To be uploaded**

Examination Centre preference:

1.

2.

3.

I, hereby declare that the information furnished in the application is true, complete and correct to the best of my knowledge and belief. I am fully aware that in the event of any of the said information furnished by me being found false or incorrect at any stage, my candidature / appointment is liable to be summarily cancelled / terminated without any notice Or compensation.

Place: (Digital signature of the candidate)

Date:

Documents to be uploaded as per the requirement for post applied for:
1.   Photograph
2.   Date of birth certificate Or proof of DOB / age
3.   Certificate of 12th Or Intermediate or equivalent from the recognized Board / University
4.   Degree from the recognized Board / University
5.   Typing Certificate issued by Concerned State Technical Board
6.   PGDCA Or any other Computer course Certificate issued by government recognized board / Institution
7.   Stenography lower (80 wpm) certificate issued by concerned State Technical Board
8.   Stenography higher (120 wpm) certificate issued by concerned State Technical Board
9.   Age concession format in case of Central Government Employee
10.   "No objection Certificate" from the present employer for applying the post.
11.   SC/ST certificate (to be upload with regard to respective category)
12.   Latest OBC/EWS certificate (to be upload to respective category)

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Important: This is sample online application format, at the time of designing the same by the firm correction request by the ICMR-NIN to be incorporated.

Date: 17-01-2024

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