|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CENTRE FOR WATER RESOURCES DEVELOPMENT AND MANAGEMENT**  **KUNNAMANGALAM(PO), KOZHIKODE – 673 571** | | | | | | | Paste  Passport Size  Photo | | |
| 1.Post applied for: | | | | | | |
| 2. a) Advt. No: | | | | Date: | | |
| 3.NAME (in CAPITALS):  Expansion of initials: | | | | | | |
| 4.Father’s/Husband’s Name: | | | | | | |
| 5. a) Address for Communication  (in CAPITALS) | | | b) Permanent Address (in CAPITALS) | | | | c) Nationality: | | |
| PIN   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |   Phone No: | | | PIN   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |   Phone No: | | | | d) Sate of Domicile: | | |
| e) Place of Birth (District): | | |
| f) Religion: | | |
| g) Caste(SC/ST/OBC): | | |
| 6. a) Date of Birth in Christian era(date,month,year):  D D M M Y Y   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | | | | | | | | b) Sex (M/F): | | |
| 7. a) Present Job: b) Employer: c) Salary: | | | | | | | | | |
| 8. Professional affiliations if any: | | | | | | | | | |
| 9. Languages known: | | | | | | | | | |
| 10. Educational Qualifications, commencing from matriculation (Copies of Certificates and mark lists to be attached) | | | | | | | | | |
| Exam/Degree | Institution | From | To | | Name of Board/University | % of Marks | | Year | Class/  Division |
|  |  |  |  | |  |  | |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 11. Experience/Training(in chronological order): | | | | | | |
| Designation and Nature of Duties | Name of Employer | | From | To | Salary Drawn | Reason for leaving |
|  |  | |  |  |  |  |
| 12. Pay expected and complete details if pay is to be allowed more than minimum of the scale of pay applicable to the post applied for | | | | | | |
| 13. If selected, how soon will you be able to join duty | | | | | | |
| 14. Persons(not relatives) to whom references regarding the applicant’s work and conduct can be made | | | | | | |
| a) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Positions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | b) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Positions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| 15. List of Certificates/testimonials attached (one testimonial to be from the employer/Head under whom the applicant served/studied) | | | | | | |
| 16. Any other relevant information, the candidate wishes to furnish  (attach separate sheet if needed) | | | | | | |
| I hereby declare that the entries in this form are true to the best of my knowledge and belief.  Place \_\_\_\_\_\_\_\_\_\_\_\_  Signature of the Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |

**INDEX CARD**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Post Applied for: | | | | | | Name (Block Letters): | | | | | |
| Discipline/Department: | | | | | | Postal Address:  Pin   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | | | | | | |
| Date of Birth: | | | | | |
| Age (as on 1St Jan. of Current Year) | | | | | |
| **Educational Qualifications** | | | | | | | | | | | |
| Degree | | Year of Passing | Class/Division | | | | % of Marks | | University/Institute | | |
|  | |  |  | | | |  | |  | | |
| **Experience:** | | | | | | | | | | | |
| Post held | Organization | | | | From | | | To | | Years | Months |
|  |  | | | |  | | |  | |  |  |
|  | | | | | | | | | | | Total |
|  | | | | **Signature of the Applicant** | | | | | | | |
| (To be completed by the candidate and enclosed with the application. Since this Index card is a self-contained document, additional sheets should not be enclosed. If the space provided is insufficient, give only the most relevant information and accommodate within available space) | | | | | | | | | | | |
| FOR OFFICE USE ONLY  Remarks  Checked by \_\_\_\_\_\_\_\_\_ Verified by \_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |