APPLICATION FOR THE POST OF DIRECTOR GENERAL, CENTRE FOR MATERIALS FOR ELECTRONICS TECHNOLOGY (C-MET)

PART – I

PROFORMA FOR APPLICATION

Mode	` '	irect R Absorp	lecruitment tion	
	(C) I	Deputa	tion (including short ter	m contract)
(Please tick the relevant option)				
1.	Name in full	:		
				Affix passport size photograph
2.	Name and Address (In Block Letters)	:		
3.	Father's name	:		
4.	Sex	:	Male / Female	
5.	Nationality	:		
6.	Date of Birth (Proof of Date of Birth mus	: t be en	closed)	
7.	Age: (As on closing date of appl	: ication)	YM	D
8.	Marital Status	:		
9.	Whether belong to SC/ST/OBC/PH/General (in case of SC/ST/OBC/PI		f shall be enclosed)	

Name of the Instt./Board/Universit	he Year ty pass	of sing	Examination/ Degree	Percentage marks Aggregate Division	of in and
(Specify the gap with 13. Field of Specializat	cion:				
	tion: th work and	publicati	ons:		
13. Field of Specializat	cion: ch work and s to be furnisi	publicati hed, if av logical or	ons: ailable) der & experience	: :	
13. Field of Specializat 14. Resume of Research (One set of reprints)	ch work and s to be furnishery in chronological	publicati hed, if av logical or ving formo	ons: ailable) der & experience at, if necessary)		Reas for le each

10. Address for correspondence (with pin code):

(Tel.No., Mobile No. & e-mail, if any)

12. Academic & Professional Qualifications:

11.Permanent Address

16. Professional Training:

Organization	Details of Training	Period	
J		From	То

		×	
17. Achievements in the c	areer which		
may support your car	ndidature	:	

i) Designation of the post held

18. Details of present employment

- ii) Scale of pay of the post (Level in the P.M)
- iii) Total emoluments per month now drawn: (with break up Basic, GP, HRA, DA, TA etc.)
- iv) Whether present post is held on regular / tenure / Deputation or ad-hoc basis and since when:
- v) If on deputation, details of post held on Regular basis / scale of pay and since when :
- vi) Name of the Organization with full address indicating Name and Designation of the contact person And Telephone:
- vii) Category of the Organization:
 - (a) Government / State Government
 - (b) PSU / Autonomous Body
 - (c) Private
- 19. A brief write-up as to how you plan to take C-MET forward as its Director General:

20. Any other information:

Note: Candidates are requested to enclose the copies of documents for substantiating their all the above given information.

Declaration: I hereby solemnly declare that all the above statements are true and correct to the best of my knowledge and belief. Nothing is false or has been concealed / distorted. If at any time, I am found to have concealed / distorted any material information my appointment shall be liable to summary termination without notice.

Place: Signature:

Date: Name of the applicant:

E-mail ID:

Tel.No.:

Mobile No.:

PART - II

(To be filled in by the Competent Authority in the case of candidates who are presently working in Government / PSU / Autonomous Organizations only)

Certified that:

The information given above by the officer is correct. (i)

No Vigilance / Disciplinary Proceedings are either pending or contemplated against the above-mentioned officer. (ii)

Date:	Signature:
	Name:
	Designation:
	Department:
	Organization: