



भाकृअनुप - राषुड्रीय चावल अनुसंधान संस्थान

कटक-753006 (ओडिशा), भारत

ICAR- NATIONAL RICE RESEARCH INSTITUTE

CUTTACK-753 006, (ODISHA), INDIA

PHONE: 0671-2367768-783, FAX: 0671-2367663, E-mail: crrietc@nic.in



BIO-DATA

1. Name of the Post :
2. EAP No. :
3. Name of the Candidate :
(in block letters)
4. Father/Husband Name :
5. Date of Birth & age : /
6. Category (UR/OBC/SC/ST) :
7. Sex (Male/Female) :
8. Marital Status :
9. Telephone No. :
10. Mail Id :
11. Present Postal Address :

Affix a passport size
photograph

12. Educational Qualification (Matric onwards to be filled correctly)

Examination Passed	Subject of Specialization	Board / University	Aggregate & accurate % of marks	Duration of Course	Year of Passing
Matriculation					
Intermediate					
Graduation					
Post-Graduation					
NET (if required)					
Ph. D. (if required)					
No. of Publication (if required)					
Experience (if required)					

13. Related to any employee (blood relation) of NRRI or any other Institute of ICAR. If yes, furnish the name & designation with address of the employee and the nature of relation

I hereby declare that all the statement made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect/incomplete or in-eligibility being detected at any time before or after selection/ interview, my candidature is liable to be rejected and I shall bound by the decision of the employer.

Date :

Full Signature of the candidate