

Annexure 1 – Application Form

Engagement of Retired Employees as Consultant in CSIR-IGIB, Delhi 07

Advertisement No:- 03/2026

1. Full Name: _____

2. Father's Name: _____

3. Date of Birth: _____ (DD/MM/YY) Age (as on date): _____

4. Gender: Male/ Female

5. Full Address (PIN code): _____

6. Mobile No. _____

7. E-Mail Address: _____

8. Basic Pension: _____ (enclose copy of PPO)

9. Last Pay Drawn and Pay Level: _____ (enclose last pay slip)

10. Details of the Education Qualification held by the Applicant.

S. No.	Education Qualification	Passing Year	Marks	Percentage

11. Employment History in chronological order.

(Attach separate sheet in following format, if necessary)

Name and Address of employer / organization	Period of service	Designation of the post held	Remuneration	Detailed description of work	Reason of leaving each post

12. Professional Trainings/ Certifications

Organization	Details of Training/ Certificate	Period	
		From	To

Declaration: I hereby solemnly declare that all the above-mentioned 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 termination without notice.

Place: _____

Date: _____

Signature of Applicant _____

Name of Applicant _____