



Uttarakhand State Council for Science & Technology (UCOST)

Department of Science & Technology (Govt. of Uttarakhand)

Vigyan Dham, Jhajra, Dehradun [UK]-248007

APPLICATION FORM

(For the post of Scientist-‘B’ & Project Scientist)

Advt. No

Post applied for (Scientist-‘B’/Project Scientist)

.....

Affix here a
Passport size
Photograph duly
signed by applicant

I IDENTIFYING DATA:

1. Name in full (in block letters) Dr/Mr/Ms.....

2. Date of Birth.....3. Father’s/Husband’s Name.....

4. Mailing Address.....

.....

.....Pin Code.....

Tel. No.....Mobile No.....E-mail.....

5. Permanent Address.....

.....

.....Pin Code

6. Marital Status.....7. Nationality.....

8. State of Domicile.....9. Do you belong to SC/ST/OBC/PH ?

10. Religion:

II. MISCELLANEOUS DATA:

1. Do you hold a Post Graduate Diploma in Intellectual Property Rights? (Yes/No), if no, do you have two years experience in Management of Intellectual Property Rights?

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2. If selected for appointment, what notice period would you require for joining the post?

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3. Names and Addresses of two Referees:

(i)..... (ii).....

.....

.....

Date:

(Signature of Applicant)

* In case there is any subsequent change in the contact address/telephone numbers etc., please inform us at the email ucost@ucost.in.

(Please fill this proforma in block capitals. Incomplete applications are liable to be rejected.)

(Application and Bio-Data forms are meant to obtain minimum information required for being considered for the post applied for. Candidates may furnish any additional relevant information that they consider necessary, on separate sheets.)

BRIEF BIO-DATA

Post applied for:

Name :Date of Birth.....

Whether belonging to SC/ST/OBC/PH.....

Present Employer.....

EDUCATIONAL QUALIFICATIONS (Starting with highest degree obtained):

Examination/Degree	Subject (s)	Percentage of Marks/Final Grade	Name of College/ University/Board	Year

Title of Ph.D. Thesis and year of submission.....

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Whether qualified UGC/CSIR/JRF Test

(If yes, indicate the year, and attach a photocopy of certificate)

Details of Employment: (in chronological order starting with the most recent)

Institution	Designation	Period		Nature of Duties	Basic salary last drawn and pay scale
		From	To		

Total Year of Exp:

Details of any Training:

Institution	Place	Period	
		From	To

Experience: Management of IPR ___ years; Teaching ___ years; Research (excluding M.Phil./Ph.D. research) ___ years

Total : ___ years

Please indicate how you fulfil the desirable qualifications, if any, indicated for the post.

I hereby declare that the information given by me in the proforma is correct and no relevant information has been concealed.

Date: _____

Place: _____

(Signature of the Applicant)