

# CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

## For Office Use only

Application fee paid \_\_\_\_\_  
Call for interview \_\_\_\_\_  
Rejected \_\_\_\_\_  
Signature \_\_\_\_\_  
Advertisement No. \_\_\_\_\_

DD No.(s):

Name of the Post

Office/Bank: Date :

Value : Rs.

## APPLICATION FOR THE POST OF

(The application form is not to be used for any post other than that for which it is supplied)

1. Candidate's name in full  
(BLOCK CAPITALS) \_\_\_\_\_
2. Father's name in full \_\_\_\_\_
3. Address  
(i) Postal address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(ii) Permanent address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(iii) Email address \_\_\_\_\_  
(iv) Telephone/Mobile No. (if any) \_\_\_\_\_  
\_\_\_\_\_
4. a) Date of birth \_\_\_\_\_  
(Based on Matriculation or School Leaving certificate. An attested copy of the certificate must be attached)  
b) Age as on the last date of receipt of application:  

Years	Months
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5. Place of Birth and State in which it is situated \_\_\_\_\_
6. Nationality \_\_\_\_\_  
State either by birth or by Domicile \_\_\_\_\_
7. Caste \_\_\_\_\_ State whether SC/ST/OBC

(An attested copy of the certificate must be attached)

8. a) Father's nationality \_\_\_\_\_  
b) Profession \_\_\_\_\_  
c) Name of the State to which the candidate's father belong or belonged \_\_\_\_\_
9. a) Candidate's mother tongue \_\_\_\_\_  
b) Other Indian and foreign language, if any, he can speak, read and write fluently. Give full particulars and state the examinations passed, if any, in each: \_\_\_\_\_

Read only	Speak only	Read & speak	Read, write & speak	Examinations passed
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10. Scholars and Fellowships with details:

- 1.
- 2.
- 3.

11. Examination passed:

Examination passed	Name of the School/College	University or Board	Year	%age of marks	Subjects	Distinction

**N.B.:- Mark cross (x) against columns which do not apply in the candidate's case and strike out portions which do not apply).**

12. Appointments so far held:

S.No.	Name of the post with full address of the employers	Date of joining	Date of leaving	Nature of duties performed during the service	Scale of pay and basic pay drawn	Reasons for leaving

13. Are you married? \_\_\_\_\_

a) If your answer to (13) is 'yes', state whether you have been more than one wife living/you are married to a person having already a wife living.

14. If the candidate has been outside India, the following particulars should be given:

Country visited	Date of visit	Duration of visit	Purpose of visit

15 Any position of authority or distinction (other than scholarship) gained at schools or colleges including games and sports and other special activities:

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16. Any other work relevant to the qualifications for the post applied for done since leaving colleges with dates:

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17. Particulars of literary, cultural or similar other activities (e.g. attainment in sports etc.) and distinctions, if any, gained:

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18. a) Are you free from debt? (Answer 'yes' or 'no')

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b) If you are under liability to replay Money advanced by any institution or party for any purpose, state the particulars:

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c) If the answer to (a) is 'No' Answer (b) clearly:

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19. Name of the post with particulars for which the applicant may have applied already which has not yet been disposed off.

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20. Is he willing to accept the minimum initial pay in the scale? If not, the pay demanded with reasons thereof:

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21. What notice would you required to join the post, if offered:

22. Name, addresses and professions of two referees, who should be responsible persons, not related to the candidate but well acquainted with him in private life, and not connected with his school or college.

S.No.	Name of referees	Address	Period for which he was known to the candidate
1.			
2			

23. Details of enclosures:

- |    |     |
|----|-----|
| 1. | 2.  |
| 3. | 4.  |
| 5. | 6.  |
| 7. | 8.  |
| 9. | 10. |

24. Additional information if any:

**D E C L A R A T I O N**

I, declare that all statements recorded in the application form are true to the best of my knowledge and belief.

Signature of the candidate in full

Present address for correspondence

Place :

Date :

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If employed, remarks of the forwarding authority :

Signature

Name

Designation

Place :

Date :

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Note : Application not signed by the candidate is liable to rejection.