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| download **वि. सं. : 04/20****भौतिक अनुसन्धान प्रयोगशाला के** **उदयपुर सौर वेधशाला, उदयपुर में कार्यालय प्रशिक्षु हेतु आवेदन** **ADVT. NO.: 04/20****Application for Office Trainee at Udaipur Solar Observatory, Udaipur of Physical Research Laboratory** | (passport size color photograph) |
| Have you availed / availing similar traineeship at PRL or its observatories **YES / NO** |
| **Full Name :**  |  |
| **Father's Name** :  |  |
| **Category** |  | **Person with Benchmark Disability Category (40% disability and above)****YES/NO** |
|  | (SC/ST/OBC/UR) |  |
| If belongs to reserved category/PwBD category, seeking age relaxation, please enclose copy of latest caste/PwBD certificate in the prescribed proforma, issued by appropriate authority. Refer our web site [www.prl.res.in](http://www.prl.res.in/) (🡪Opportunities🡪Job vacancies) for prescribed proforma. |

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| **Gender :** |  | **Marital Status** :  |
| **Date of Birth (DD/MM/YYYY)** **(enclose documentary evidence)** |
| **Address for Correspondence/****Communication**  | State :Pin Code: | **Permanent Address** | State:Pin Code: |
| **E-Mail address:** | **Nearest Railway Station**  |
| **Telephone No.**  | **Mobile No.**  |

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| **Educational Qualifications *(Write Degree/ Diploma name specifically at the space provided at first column of each row)*** |
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| **Exam Passed**  | **Year of Passing**  | **Board/ University/Institute**  | **Total Marks**  | **Marks obtained (Give equivalent Marks in case of Grading system or any other system followed)**  | **Percentage or give equivalent conversion to Percentage**  |       **Subjects** |
| **QUALIFYING EXAMS** |
| **Graduate in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  |
| ***OTHER QUALIFICATIONS*** *(Please do not repeat the qualification/s already provided above )*  |
| **SSC/ 1Oth**  |  |  |  |  |  |  |
| **HSC/ 12th**  |  |  |  |  |  |  |
| **Certificate/ Diploma in Computer Applications**   |    |    |    |    |    |    |
| **Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  |

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**(Enclose documentary evidence Degree certificate/mark sheet of each semester/year of the education qualification information as provided above)**

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| **Do you possess 55% in qualifying examination?** YES / NO |
| **Do you possess working knowledge of Tally software?** YES / NO |
| **Do you possess knowledge of Hindi word processing on computer?** YES / NO |

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| **Experience Details Please provide details in chronological order starting from present/latest job**  |
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| **Name of the Employerwith Full address** | **Whether central/State/PSU/PSEAutonomous/Private LTD./Other(Pls specify)** | **Post held** | Adhoc\ Regular\Temp\ Contract | **From(dd-mm-yyyy)** | **To(dd-mm-yyyy)** | **Total Period of Service Year Month** | **Scale of Pay** | **Total Salary Drawn** | **Nature of Duties** |
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| **If required enclose additional sheet in the same format** |

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**(Enclose documentary evidence pertaining to each entry)**

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| **Two References (with full address and contact numbers):**  |
| 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact Number :1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact Number : |
| **If selected minimum time required to join USOOB, Udaipur:**  |
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| **Any Other relevant information :**  |
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| I hereby certify that the fore-going information is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. In case I have given wrong information, or suppressed any material fact or factual information, then my selection is liable to be terminated, without giving any notice or reason therefore. I am not aware of any circumstances which might impair my fitness for employment. I also undertake that, I am possessing all the relevant certificates/documents issued by relevant competent Authority on the date of submitting application. |
|  |
| **Place**  | Signature of Candidate |
| **Date of Application :**  | **Name:** |