Telephones Nos. 020-27331200 020-27331333 GRAM: NARI,PUNE FAX: 91-20-27121071 ICMR WEBSITE: www.nari-icmr.res.in EMAIL : establishment.nari@gmail.com



ICMR-NATIONAL AIDS RESEARCH INSTITUTE

(Indian Council of Medical Research)

Department of Health Research, (Ministry of Health & Family Welfare), Plot No. 73, 'G' Block, MIDC, Bhosari, Pune-





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## (APPLICATION FORM FOR SCIENTIFIC POSTS)

Note: All answers must be given in words and not by dashes and dots. No columns should be left blank.

Application Id: 57783/NARI/21-22/T

Name of the post applied for			ement for the post and under Gennov	
1.Name in Full:Mr/Miss/Mrs/Dr.		Priyanka	P dhal	
Address (i) Permanent:		Qrno.32080,type3,phase2		
Address (ii) Present:		Badmal		
		Bolangir		
		Qrno.320	80,type3,phase2	
		Badmal		
		Bolangir		
Contact Telephone No. 637219212		126	Mobile I	No. 9937628171
E-mail Address :	priyankadhal8267@gmail.com			
Date of Birth :	15/07/1997		Caste Category :	Open/General
Marital Status :	Unmarried		Nationality:	Indian
Gender:	Female			
Physically Handicaped: No				
Physically Handicaped Details :				

#### **Education Details:**

Examination	Class	Subject Taken	Passing Year
Graduation	68	Biotechnology	2017
HSC	63	РСМВ	2014
SSC	8.4	English, hindi, mathematics	2012

### Employer Details:

Name	Nature of Work	Date of join	Date of Leave	Salary
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#### **References:**

(These should be persons resident of India and holders of responsible position. They should be intimately acquainted with the applicant's character and work, but must not be relatives. Where the candidate has been in employment, he would either give his present or most recent employer or immediate superior as a reference or produce testimonials from him in regard to the candidate's fitness for the post for which he is an applicant).

Reference #1	Name :	Dr.Arup Sarkar
	Occupation/Postion :	Professor
	Address :	TACT,Bhubneshwar
Reference #2	Name :	Dr. Bishnuprasad Dash
	Occupation/Postion :	Professor
	Address :	Fakir Mohan University,Balasore
Reference #3	Name :	Sunil kumar
	Occupation/Postion :	Lecturer
	Address :	MITS, Rayagada

Additional Information: I have 4 months experience working as a Medical Lab technician in healthcare sector and have 6 months experience as research trainee working on abnormal hemoglobinathies in Fakir Mohan Research unit, F.M. University, Balasore.

## DECLARATION

# I HEREBY DECLARE THAT THE PARTICULARS FURNISHED IN THIS FORM BY ME ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature of Candidate Place: Date: