Application for the post of Young Professional-II

- 1. Full Name in Block Letters:
- 2. Father / Husband Name:
- 3. Gender/Sex:
- 4. Date of Birth and age as on closing date of application (attach the proof):
- 5. Address for Communication with PIN Code:
- 6. Mobile No:
- 7. E-mail:
- 8. Details of Education Qualification from 10th onwards (Attach self-attested copies of certificate)

Qualifications	Board / Univ.	Specialization as per the education qualification certificate	Division	% of Marks	Proof (attachment -page no.)
1. 10 th					
2. 10+2					
3. Bachelor Degree					
4. Master Degree					
5. Doctoral Degree					
6. Any other					

If required, add more row and column

9. Experience (Attach self-attested copies of certificate)

Name of the	Designatio	Joining	Relievin	Po	eriod	Proof
Organizatio n	n ·	date with month and year	g date with month and year	Year s	Month s	(attachmen t –page no.)

If required, add more row and column

10. Publication (Attach the proof-1st page)

Authors details	Title	Journal name	NAAS rating	Proof (attachment
				-page no.)

		Q	
If required, a	dd more row and co	lumn	
1. Award/Fellow	yship/Scholarship (A	Attach self-attested	copies of certificate)
Name of the	Agency	Year	Proof (attachment

Name of the award	Agency	Year	Proof -page	(attachment no.)
-				,

If required, add more row and column

12. Are you qualified in NET exam?

YES/NO, IF YES, PLEASE MENTION DECIPLINE AND ATTACH THE PROOF FOR THE SAME

13. Other information, if any

UNDER TAKING

I do hereby declare and certify that the information furnished in the application are correct and true to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect / incomplete or ineligibility being detected at any time before or after the interview / selection, my candidature is liable to be rejected/ cancelled without notice. I shall be bound by the decision of Dean, College of Fisheries, GADVASU, Ludhiana, Punjab.

Place:	Candidate Signature
Date :	Name