



## ICAR- Directorate of Foot and Mouth Disease

खुरपकामुँहपकारोगनिदेशालय

(Indian Council of Agricultural Research)

(भारतीय कृषिअनुसंधान परिषद्)

Mukteshwar- 263138, Uttarakhand, मुक्तेश्वर-263138, उत्तराखण्ड

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[www.pdfmd.ernet.in](http://www.pdfmd.ernet.in)



### BIOGRAPHICAL DATA

(To be filled in by the candidate in his / her own handwriting and submitted in triplicate)

1. Name of the Post: YPI/YPII/SRF/RA (Tick Mark the relevant)

2. Place of Interview: ICFMD, Arugul, Bhubaneswar

3. Date of Interview: 16<sup>th</sup> July 2018 – YP I

17<sup>th</sup> July 2018 – YP II

18<sup>th</sup> July 2018 – RA/SRF

Note: Please Sign on  
your Photograph after  
affixing

4. Name (In Block Letters) (as written in Application Form):

5. Sex: (Male / Female)

6. Date of Birth:

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Date

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Month

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Year

7. Marital Status: (Unmarried/Married)

8. Father's / Husband's Name:

9. (i) Present Address (with mobile number and e-mail id):

(ii) Permanent Address:

10. (i) Mother Tongue: (Read/Write/Speak) (Tick Mark the appropriates)

(ii) Other Languages Known:

11. RECORD OF EDUCATIONAL QUALIFICATION

Sl. No.	Name of the Examination Degree (beginning with Matric.)	Board/University	Year of Passing	Class / Division	% of Marks	Medium of Instruction	Subjects/Honors or Spl.Subjects may be mentioned	Outstanding Achievements if any Mention Prizes / Scholarships / Stipends etc.
1	2	3	4	5	6	7	8	9

12. Details of Professional experience, if any (in reverse chronological order i.e., last one first and so on) (with Certificates)

Designation	Nature of Duties (in brief)	Name of Organization (with address)	Period	Monthly Salary drawn

13. Research Publication (if any in case of RA/SRF)

14. Awards/Patents/Prizes etc (if any)

15. Hobbies / Interests:

16. What have you been doing since you completed your studies?

17. Any other relevant information the candidate would like to state?

### **DECLARATION**

I hereby declare that the above mentioned information is correct to the best of my knowledge and belief. If selected, I promise to abide by the rules and discipline of the Institute.

I note that the decision of the Institute is final in regard to selection. The Institute shall have the right to expel me from the Institute at any time after my selection, provided it is found that I was admitted on false particulars furnished by me or my antecedents prove that my continuance in the Institute is not desirable. I agree that I shall abide by the decision of the Institute, which shall be final.

Date:

Place:

Signature of Candidate