

भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान मोहाली

(शिक्षा मंत्रालय, भारत सरकार) सैक्टर-81, नॉंलेज सिटी, डा. घ. मनौली, सा. अ. सिं. नगर, मोहाली, पंजाब - 140306

INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH MOHALI

(Ministry of Education, Govt. of India)

Sector – 81, Knowledge City, P. O. Manauli, S. A. S. Nagar, Mohali, Punjab – 140306

APPLICATION FOR THE ENGAGEMENT OF APPRENTICES

Paste a clear recentpassportsizephotographandsign across.

1.	POST CODE			
2.	Name in full (CAPITAL LETTERS)			
3.	Date of Birth (Enclose Self-attested copy of 10 th Class / Matriculation Certificate)	Day	Month	Year
4.	Citizenship Status (Tick the appropriate box)	Citizen of India by Birth by Domicile		
5.	Member of SC / ST / OBC-NCL / PwBD	Write SC / ST / OBC-NCL / (Attach Certificate) -		
		Please indicate whether Person with Disability - (Attach Certificate).		
6.	Gender			
7.	Marital Status			
8.	Religion			
9.	Correspondence Address			
10.	Permanent Address			
11.	Father's/ Husband's Name			

12.	Contact Number							
13.	Email ID							
14.	Aadhar No. (Please attach self-attested copy)							
15.	Are you related to any person who is an employee or student at IISER Mohali, or is an applicant for such a position? If yes, state particulars about him or her.							
16.	Details of Educational qualifications starting from 10 th Standard/ Matriculation onwards							
J. J		Examination / Degree	Subjects / Specialization	Division and Percentage	Year of Passing			
17.	Other Information:							
a)	Have you ever been published or convicted by a Court of Law?		Yes / No (Tick whatever applicable)					
b)	Do you have any case pending against you in any Court of Law?		Yes / No (Tick whatever applicable)					
18.	Any other relevant inform sheets if necessary)	mation (attach						
19.	I hereby declare that the information given above are true, complete and correct to the best of my knowledge and belief. No information has been concealed. And I fully understand that if it is found at a later date that any information given in the application is incorrect/ false or if I do not satisfy the eligibility criteria, my candidature/ appointment is liable to be cancelled/ terminated by the Institute.							
	Place :							
	Date : Signature of the Applicant							