No. JIP/PSM/ HTAIn/23/26

APPLICATION FOR THE POST OF (*NAME OF THE POST*)

*For the Project: (***Economic Evaluation of Antimicrobial Stewardship (AMS) and Infection Prevention and Control (IPC) interventions in Indian Healthcare Facilities – Multicentric Study***)*

Print in A4 size paper and fill in with Block Letters with BLUE PEN

Applicant's name		Affix your recent passport size photo (Do not staple)
Father's name		
Date of birth dd/mm/yyyy)		
Age on last dates for application	___ y, ___ mo, ____ d	
Sex (male/female/other)		
Married/unmarried		
Nationality		
Religion		
Whether SC/ST/OBC		(please attach proof)
Communication address (including PIN)		
Mobile number		
Email ID		
Have you ever been convicted by a court of law or is any criminal case / disciplinary action/vigilance enquiry pending against you? If yes, provide/attach details.		
Language proficiency	Converse	
	Read	
	Write	

Educational Qualifications: *(Enclose self-attested photocopies)*

	Qualifications (from SSLC/Matriculation onwards)	**Board/University**	**Year of Passing**	**% Marks**	**Subjects**
1	Tenth or equivalent				
2	Higher Secondary				
3					
4					
5					

Details of Previous Employment (if any): *(Pls attach PDFs of proof of work)*

	Employer	**Designation**	**From (date)**	**To (date)**	**Duration (yrs, mos, days)**	**Nature of duties**
1						
2						
3						
4						

A. Fields of Research Experience / Paper submission in national-level conference or publications (if any)

B. The project work involves travel to the field/other centers for the study. Will you be willing for the same (Yes/No): _____

Please provide the contact information /email and telephone number of your previous employer whom we can contact regarding your previous/ current work. *(Please inform and the persons you list below that they may be receiving calls from us regarding this position, and obtain their permission to mention their names)*

I accept enquires about my previous work with my earlier employer(s): Yes / No

Contact information of previous employer(s):

Name	Designation	Company / Organization Name	Phone	Email ID

Check List: (Please tick against those enclosed)

All Certificates must be self-attested and attached in the following order:

Proof of Identity (Copy of Aadhaar card/ Voter ID / Passport /Driving License	
Certificate in support of age (Tenth equivalent / High School Certificate)	
Degrees/Diplomas	
Experience certificates	
Any others (if relevant; specify)	

DECLARATION BY THE APPLICANT

Application for the post of: (NAME OF THE POST)

I, _____, wish to apply for the above contract post in an extramural research project, and hereby declare that all the statements made in this application are true, complete, and correct to the best of my knowledge and belief. I understand that if any information is found false, incorrect or ineligible and detected before or after the selection process, my candidature or employment will be terminated. Further, I declare that I have gone through the terms and conditions of the appointment. I will abide by the same and I understand that through applying, qualifying or engagement on this position, I will have no claim against any regular position at JIPMER.

Place:

Date: (Signature of the Applicant)

NAME (in block letters):