

**LABORATORIES
TEXTILES COMMITTEE**
Govt. of India, Ministry of Textiles

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APPLICATION FORM

Advt No : TC/Fellow (TT)/2014

1	Post Applied for (in block letter)	
2	Name of applicant (in block letter)	
3	Father's Name	
4	Marital Status	
5	Present Postal Address for communication (in block letter) with pin code	
6	(a) Telephone No (with STD code) (b) Mobile No. (c) E-mail address	
7	Permanent Address	
8	Date of Birth (DD/MM/YYYY) (please attach proof of DoB)	
	Age as on 30/09/2014 (Years – Months)	
9	Nationality	
10	Religion	
11	Category (SC/ST/OBC/PH/GEN)	
12	Whether differently abled person?	

	If yes, please give type of disability	
13	Preferred Place of Posting (please provide order of preference) a. Mumbai b. Tirupur c. Hyderabad d. Chennai e. Karur	

14. Educational Qualification starting with Secondary Education: Please attach self attested copies of certificate/mark sheets

Examination /Degree	University/Board	Year of Passing	% of Marks/Division	Subject taken

15. Experience, if any (Please start with latest)

Name of the Employer	Post Held	Period		Last salary Drawn	Nature of Work
		From	To		

Declaration

I hereby declare that all the statements made in this application are true and complete to the best of my knowledge and belief. I further understand that at any time I am found to have concealed/distorted any material information, my candidature/appointment terminated without any notice.

Date:
Place

Signature of the Candidate with Name