**Format of Application for the post of Registrar, TIFR Mumbai**

Affix the latest passport size photo

(Applicant is requested to type the information in the following format and can add more lines in the format wherever required and also any other information. Self-attested copies of certificates in proof of date of birth, educational qualification and experience should be attached to the application)

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| 1. **General information of applicant**
 |
| Name in full(In capital letters) |  |
| Date of Birth(Day/Month/Year) |  |
| Correspondent Address |  |
| Permanent Address |  |
| Nationality |  |
| Phone No. | Mobile No.Landline No. |
| Email |  |

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| 1. **Present Position**
 |
| a) | Designation |  |
| b) | Organization |  |
| c) | Pay Level & Pay Stage / TME (Total Monthly Emoluments) |  |
| d) | Date of appointment to the present post |  |
| e) | Total Experience (in Years and Months) |  |
| f) | Nature of duties |  |

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| 1. **Details of experience possessed :**
 |
| Sr. No. | Post held | Pay Leval & Pay Stage / TME | Organization | Nature of duties | Experience (in Years and Months) |
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| 1. **Educational Qualification (In chronological from latest)**
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| Sr. No. | Qualification | University | Year | Subject(s)/Topic(s) | Percentage Achieved | Distinctions etc. |
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| 1. **Strengths (100 words)**
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| 1. **Your vision for the Institute (TIFR) (500 words)**
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| 1. **Details of Referees (Minimum Three)**
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| Sr. No. | Name of the Referee | Post held by Referee | E-Mail | Phone Number. | Mobile Number |
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| **If selected minimum time required to join TIFR (In days).** |
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I, hereby, declare that, I fulfill the eligibility conditions to the post/all the statements/particulars made/furnished in this application are true, complete and correct to the best of my knowledge and belief. I also declare and fully understand that in the event of any information furnished being found false or incorrect at any stage, my application/candidature is liable to be summarily rejected at any stage and if I am already appointed, my services are liable to be terminated without any notice.

Place:

Date: (Signature of the Applicant)