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|  | **സിദ്ധ പ്രാദേശിക ഗവേഷണ സ്ഥാപനം**  (സി.സി.ആർ.എസ്സ്. ചെന്നൈ, ആയുഷ് മന്ത്രാലയം, ഭാരത സർക്കാർ)  പൂജപ്പുര, തിരുവനന്തപുരം  सिद्ध क्षेत्रीय अनुसन्धान संस्थान  (सी.सी.आर.एस., चेन्नई, आयुष मंत्रालय, भारत सरकार के अंतर्गत)  पूजप्पुरा, तिरुवनंतपुरम - 695012, केरल  **SIDDHA REGIONAL RESEARCH INSTITUTE**  (Under C.C.R.S., Chennai, Ministry of AYUSH, Govt. of India)  Poojappura, Thiruvananthapuram - 695 012, Kerala  E-mail: srritvm10@gmail.com Phone: 0471-2341832 |
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**Application for the post of Junior Research Fellow (Botany/Chemistry)**

Affix a recent Passport size colour photograph

Project: **Preparation of monographs for some least studied /**

**extra pharmacopoeial medicinal plants in Siddha System of Medicine**

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| 1 | Name in full (in CAPITAL letters) (Enter the name as given in Matric/SSLC Certificate. If there is any change in the name, including initials, attach documentary proof) |  |
| 2 | Father’s/Husband’s name |  |
| 3 | Date of birth (as entered in Matric/SSLC/HSC) &  Age as on closing date for receipt of application |  |
| 4 | Whether belongs to SC/ST/OBC/UR (Enclose a copy of the certificate from the Competent Authority, if applicable) |  |
| 5 | Are you a physically challenged person? |  |
| 6 | Address in CAPITAL letter with PIN code  Permanent:    Correspondence: |  |
| 7 | E-mail Id: |  |
| 8 | Mobile/landline phone No.: |  |

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9. Educational Qualifications: (Attach self – attested copies of relevant documents)

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| --- | --- | --- | --- | --- | --- |
| Examination Passed | Name of the Degree/ Diploma | Name of the Board /University Division | Grade / Percentage obtained | Subject(s) (major) / Specialization | Distinction, if any |
| 10th |  |  |  |  |  |
| 10+2 or equivalent |  |  |  |  |  |
| Bachelor’s degree |  |  |  |  |  |
| Master’s degree |  |  |  |  |  |
| PhD. |  |  |  |  |  |
| Any other qualifications |  |  |  |  |  |

10. Experience: (Attach self-attested copies of relevant documents)

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| --- | --- | --- | --- | --- | --- |
| Post Held | Name of the Institution/Organization | Duration From………To…………. | Scale of Pay | Nature of duties | Reasons for quitting the service |
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11. Publication Details: (Peer reviewed Journals /books (Attach separate sheet, if space is not enough)

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| --- | --- | --- | --- | --- | --- |
| Sl. No | Title of the paper | Name of the Journal / Book | Primary/ co/ corresponding author | Impact factor | ISSN/ISBN |
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12. Work/project related to field of study/research (Give details)

13. Any computer knowledge & skill and internet applications. (Give details)

14. Other information, if any: (Enclose separate sheet, if required)

**DECLARATION**

I hereby declare that all the information provided in the application are true, complete and correct to the best of my knowledge and belief. I also fully understand that if any of the information provided by me are found false or incorrect at any stage, my candidature / appointment shall be liable for cancellation / termination without notice or any compensation in lieu thereof.

Place:

Date:

Signature of the Applicant