



Krishi Vigyan Kendra

under

(National Horticultural Research and Development Foundation)

Nafed Complex, Ujwa, New Delhi-110073

E-mail: kvkujwa@yahoo.com Tel: 9667971155

Website: www.kvkujwa.org

Advertisement No.- NHRDF/KVK/01/2022-23



Application Form (Technical Post)- (A)

Advertisement Reference and date: _____

Application for the post & S. No.: _____

1. Name of the candidate in Block letters :
2. Fathers Name :
3. Nationality :
4. Date of Birth (as per High School Certificate) & Place of Birth :
5. Age (as on closing date of Advertisement) : _____Year _____Months_____Days
6. Gender (Male/Female) :
7. Marital Status :
8. Religion :
9. Category (Please tick) : GEN_____, OBC_____, SC/ST_____
10. (a) Full postal address with pin code :

Affix self
attested recent
colour
passport size
photograph
(do not staple)

(b) Permanent address :

(c) Contact details : Phone: Mob.:

E-mail:

(d) Aadhar Number :

11. Are you a citizen of India by birth/domicile?

12. Have you ever been convicted by a court of law for any offence? If so, give details thereof.

13. Educational Qualification (Commencing from Senior Secondary School): The self-attested all certificates and mark sheets should be enclosed with application.

| Level | Year of Passing | Institute/University | Specialize Subject(s) with major field | Class/Division/Grade/ Marks/Percentage | Remarks |
|----------------------|-----------------|----------------------|--|--|---------|
| 12 th | | | | | |
| Graduation | | | | | |
| Masters | | | | | |
| Ph. D. | | | | | |
| Other qualifications | | | | | |

14. (a) Employment record (starting from the present position):

| Designation | Pay Scale | Major discipline of work experience | Nature of work | Organisation/ Institute | Place of posting | Period | |
|-------------|-----------|-------------------------------------|----------------|-------------------------|------------------|-------------------|-----------------|
| | | | | | | From (DD/MM/YYYY) | To (DD/MM/YYYY) |
| | | | | | | | |
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(b) Years of experience : (DD/MM/YYYY)_____

15. Training Attended:

| Title | Organizing Institution | Duration | |
|-------|------------------------|-------------------|-----------------|
| | | From (DD/MM/YYYY) | To (DD/MM/YYYY) |
| | | | |
| | | | |
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16. Recognitions & Awards:

| Category of Recognition/ Award | field of Recognition/ Award | Year | Awarding organization |
|--------------------------------|-----------------------------|------|-----------------------|
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| | | | |
| | | | |

17. Teaching:

| Course title/ Courses taught | Credit hours | Level of Teaching | Institute Name | Year |
|------------------------------|--------------|-------------------|----------------|------|
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18. Extension:

(a) Extension approaches for technology dissemination/adoption:

| Activity | Program details | Institute Name | Salient achievement/ outcome | Duration |
|----------|-----------------|----------------|------------------------------|----------|
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(b) Capacity Development and Collaborative programme:

| Type of programme | Program details | Institution | Co-ordination / associate | Duration |
|-------------------|-----------------|-------------|---------------------------|----------|
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19: Extra curriculum activities including sports :

| S. No. | Activity | Level of participation | Achievement | Remarks |
|--------|----------|------------------------|-------------|---------|
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20: Externally Funded Projects:

| Title of the project | Level of Association (PI/CoPI) | Period | | Value of the project (Rs. in lacs) | Sponsoring agency |
|----------------------|--------------------------------|-------------------|-----------------|------------------------------------|-------------------|
| | | From (DD/MM/YYYY) | To (DD/MM/YYYY) | | |
| | | | | | |
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21. (a) Publications:

| Authors, Year of publication, Title of the paper | Journal Name, Volume and Page No. | NAAS Journal Id As per 2023 | NAAS Rating As per 2023 |
|--|-----------------------------------|-----------------------------|-------------------------|
| | | | |
| | | | |
| | | | |

(b) Other publications:

| Category of publication | Name of publication | Authors | Year and number of pages | Publisher name |
|---|---------------------|---------|--------------------------|----------------|
| Practical/Training Manual/Books/ Monographs | | | | |
| | | | | |
| | | | | |
| Book Chapters/ Policy Papers/ Economic Reviews | | | | |
| | | | | |
| | | | | |
| Popular Articles/ Bulletins/ Short Communications | | | | |
| | | | | |
| | | | | |
| Papers in Proceedings | | | | |
| | | | | |

22. Particulars of application fees : Rs.....

D.D./P.O.No.....Date.....

Bank and Branch.....

23. Any other information candidate may like to add in separate page if any.

24. References details: (Give the name, designation and complete address of two person (not relative) from whom confidential report will be taken if needed :

| S.No. | Particulars | First Reference | Second Reference |
|-------|-------------------------|-----------------|------------------|
| (a) | Name | | |
| (b) | Designation | | |
| (c) | Organisation/department | | |
| (d) | Full address | | |
| (e) | Phone no. | | |
| (f) | Email | | |

25. Please write up in brief around 100 words about your contribution to this organisation if you selected for aforesaid post:

26. Declaration : I do hereby declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any particulars/information given above being found false/incorrect and/or if any discrepancy in the particulars is detected after my appointment, or account of wilful suppression and /or distortion on my part, my application/candidature is liable to be rejected or my services shall be liable to be terminated forthwith, as the case may be.

Place:

Signature

Date:

Name of the Candidate.....

REMARKS OF THE PRESENT EMPLOYER

(In the case of those who are already in service in original letter head)

The applicantSon/Daughter is holding a permanent/Temporary Adhoc post of in the scale of pay from and his/her present basic pay is Rs.....P.M. His/ her application is forwarded and he /she will be relieved in case he/ she is selected for the post applied for.

Date:

Place:

Signature
(Designation of Officer
(with official seal)

Sign. with date:

Name: