



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.kvkdeldhi.org

Advertisement No.- NHRDF/KVK/02/2023-24



Application Form (Technical Post)

Advertisement Reference and date: _____

Application for the post & S. No.: _____

1. Name of the candidate in Block letters :
2. Father's 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 Qualifications (Commencing from Secondary School): The self-attested copy of 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
10 th					
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)

(b) Years of experience: (DD/MM/YYYY) _____

15. Training Attended:

Title	Organizing Institution	Duration	
		From (DD/MM/YYYY)	To (DD/MM/YYYY)

16. Recognitions & Awards:

Category of Recognition/ Award	Field of Recognition/ Award	Year	Awarding Organization

17. Teaching:

Course title/ Courses taught	Credit hours	Level of Teaching	Institute Name	Year

18. Extension:

(a) Extension approaches for technology dissemination/adoption:

Activity	Program details	Institute Name	Salient achievement/ outcome	Duration

(b) Capacity Development and Collaborative programme:

Type of programme	Program details	Institution	Co-ordination / associate	Duration

19: Extra curriculum activities including sports :

S. No.	Activity	Level of participation	Achievement	Remarks

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)		

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	Title 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.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 how you will contribute to this organisation if selected for the 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