



KSCSTE-MALABAR BOTANICAL GARDEN AND INSTITUTE FOR PLANT SCIENCES

(An institution of Kerala State Council for Science, Technology & Environment)

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APPLICATION FORM

1.	Advt. No.				
2.	Post applied for				
3.	Name				
4.	Sex (Male/Female)				
5.	Nationality (Mention by Birth / Domicile)				
6.	Date of Birth (As per SSLC/SSC/+2 Certificate)	<input type="text"/> Day	<input type="text"/> Month	<input type="text"/> Year	
7.	Age (as on 16.06.2023)	<input type="text"/> Year	<input type="text"/> Months	<input type="text"/> Days	
8.	Category	SC <input type="text"/>	ST <input type="text"/>	OBC <input type="text"/>	UR <input type="text"/>
9.	Present Postal Address with Phone Number & e-mail address (for communication)				
	Phone <input type="text"/> Email <input type="text"/>				
10.	Permanent Address				

Affix your recent
colour passport size
photographs

11. Educational Qualification (Enclose documentary proof)					
Examination	Board	Subject	Year of passing	Class / Div	Marks (%) or GPA

12. Details of work experience (if any):					
Period		Name of Organization & Place	Designation/ Post held	Gross pay drawn	Whether permanent/ Temporary
From	To				

DECLARATION

I understand that the contractual appointment is purely temporary and I hereby declare that the information given above is correct, true to facts and nothing has been concealed/distorted. I am aware that, if at any time I am found to have concealed/distorted any material information, my candidature/engagement is liable to be summarily terminated without notice.

Date :
Place:

(Signature of the Candidate)