**Academy of Scientific and Innovative Research**

**Headquarters:** AcSIR, Training and Development Complex, CSIR Campus, CSIR Road, Taramani, Chennai – 600 113

**Coordination Office:** AcSIR, CSIR-Central Road Research Institute, CRRI P.O,

Delhi-Mathura Road, New Delhi – 110025

**AcSIR Coordination Office**

**Application Form for post of Executive Consultant**

|  |
| --- |
| 1. **Personal Information**
 |
| Name in full(in block letters): |  | *Affix Recent* *Photograph* |
| Father’s Name: |  |
| Nationality: |  |
| Religion: |  |
| Gender: |  Male Female |
| Category: |  Gen SC ST OBC PH  |
| Date of Birth(as per SSLC/ HSC/ SSC/ Matric Certificate) |  Date Month Year  |
| Address for Communication: |  |
| City: |  | Pin code: |  |
| State: |  |
| Phone with STD code/ Mobile No.: |  |
| E-mail: |  |
| 1. **Academic Information** (commencing with the Matriculation or equivalent examination in chronological order)
 |
| Examinations Passed | Name of the Board/ University | Year of Passing | Subject/ Specialization | Percentage/ CGPA | Class/ Division |
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| 1. **Details of Postgraduate Diploma in Computer Applications**
 |
| Name of the Institution/ Body | Duration of Diploma | Year of Passing | Subject/ Specialization |
|  |  |  |  |
| 1. **Knowledge of Computer Applications**
 |
| MS Excel |  Average Good Excellent |
| MS Word |  Average Good Excellent |
| MS Powerpoint |  Average Good Excellent |
| Video Calling (Skype etc.) |  Average Good Excellent |
| Please add additional skills, rate as above: |
|  |  |
|  |  |
|  |  |
| 1. **Work Experience** (starting from the present employment), if any\*
 |
| List Name & Address of the employer | Position Held and Nature of Work | Period | Permanent/ Temporary | Salary & Grade *(annual)* |
| From | To |
|  |  |  |  |  |  |

***\*****Please be brief, if extra space needed use* ***Page 4***

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| 1. **References**
 |
| List two references (not relatives) having knowledge of your work performance, who might be contacted, if needed. |
| Name and Occupation | Address | E-mail and Phone/ Mobile |
|  |  |  |
|  |  |  |

**DECLARATION**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that all the statements made in this application are true and complete to the best of my knowledge and belief 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 engagement as Executive Consultant is liable to be summarily terminated without notice.

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Place: |  |

|  |  |
| --- | --- |
|  |  |
|  | Signature |

SPACE FOR ADDITIONAL ENTRIES

*(Please mention section, to which the information pertains)*