

राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान

National Institute of Pharmaceutical Education and Research

Hajipur - 844 102 (Bihar) Website : www.niperhajipur.ac.in.

(Department of Pharmaceuticals, Ministry of Chemicals and Fertilizers, Government of India)

APPLICATION FORM FOR NON TEACHING POSITIONS

Application No.: [(For office use)	Self Attested Photograph
\[\] Advt. No	
Application form for the post of	
1. Name (Surname) (Middle)	(First)
2. Sex: Male/Female 3. Marital Status: Married / S	Single
4. Category GEN/ SC/ST/OBC/PH: 5. Date of Birth:	
Date 6. Address for Communication (In Block letters):	Month Year
Pin cod	de :
Phone No. : Mobile No. :	
Email Id :	
7. Permanent Address (In Block letters):	
Pin coo	<u></u>
Phone No.: Mobile No.:	
Email Id :	

8. Educational Qualification	ons starting with se	condary educatio	n (Please attach)	Xerox copies of
all Certificate & mark she	et):			

Examination	Branch/	College	Year	Percentage	Class/Division
	Specialization	/University/Institute		of mark	/Grade

Membership of profes	sional Institutions	/ Societies:
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	s/ Society Type of Membership	Name of the Professional Institutions/ Society
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10. Experiences after possessing the prescribed essential educational/technical qualifications. If space is not sufficient, additional sheets may be used:

Name of the	Post held	Type of Organisation	Perio Employ		Basic pay with Scale	Nature of
Employer		Govt/	From	То	of pay	Duty
Limployer		Autonomous /Pvt/PSU etc	110111		or pay	

- 11. Professional/ Training experience/ Details of PPO (Please attach separate sheet, if required):
- 12. Names and addresses of **two referees** (at least one of them should be familiar with your recent works)

Name	
Occupation or position	
Address	
Fax	
E-mail	
Phone No.	

13. Statement of objectives (To be filled in candidate's own handwriting)
(i) Please indicate as to why you wish to join NIPER, Hajipur.
(ii) How in your opinion do you meet the job requirement as advertised?
(iii) A short paragraph about how would you contribute in growth and development of Institute.
(Not applicable to Junior Technical Assistant)
14. Any other relevant information, if any:
DECLARATION
<u>DECLARATION</u>
I solemnly declare that the above information furnished in the application are correct to the best of my knowledge and belief. I also understand that in the case of any information furnished by me is found to be incorrect or false, I shall be disqualified and legal action makes taken against me.
Date:
Place: (Signature of Applicant)
List of Enclosures :
(i)
(ii)
(iii)
(iv)
(v)

(vi)