

Indian Academy of Sciences
C V Raman Avenue, Bengaluru 560 080

Application for the Post of:
Accounts Assistant

Affix colored
 Passport Size
 Photograph
 (Not more than
 three months old)

1.	Name in full (starting with last name) in BLOCK LETTERS (leaving one space blank between two parts of name)	:			
2.	a) Date of Birth :	:	DATE	MONTH	YEAR
	b) Age in completed years	:			
	c) Nationality	:			
3.	(i) Address for correspondence (in BLOCK LETTERS)	:			
			Pin Code :		
	(ii) Telephone No.: (a) Office : (b) Residence :	:			
	(iii) Mobile No. (mandatory) : .	:			
	(iv) E-mail ID (mandatory) :	:			
4.	Permanent Address (in BLOCK LETTERS)	:			
			Pin Code : Telephone Number :		

5. Details of the Post being held presently

Name and date of the present post being held	Nature of duties		Name, designation, address and contact numbers (including mobile no. and e-mail ID) of the superior officers / authorities to whom currently reporting and the previous supervisor, if any.	Any other relevant details of service

6. Previous employment record

(Details in chronological order, starting with the first job. Attach a separate sheet)

Name and address of the employer / institution	Nature of employment (ad hoc / regular / temp. etc)	Period worked		Total period of employment in years, months and days	Gross Pay	Nature of duties
		From	Date			

7. Educational Qualifications

(In chronological order from matriculation onwards. Enclose a separate sheet, duly authenticated with your signature, if the space below is insufficient. Copies of certificates must be attached)

SL. No.	EXAMS PASSED	UNIVERSITY / INSTITUTION / BOARD	YEAR OF PASSING	SPECIALISATION SUBJECT, IF ANY	DIV. / CLASS AND % OF MARKS

8. Professional Training/Certificate courses undergone:

SL. No.	Name of the Programme/Course	PERIOD		Name of the Organiser
		From	To	

9. Please justify your suitability for the position applied, in not more than 150 words :

10. Give below the names of three references (they must not be related to you) who are in a position to testify from their personal knowledge regarding your suitability for the proposed appointment. They could be persons under whom you have worked or studied. (One of the referees should be your immediate supervisor at your work place). Name (s) with full address and contact number, (Including mobile no. and e-mail address)

- 1.
- 2.
- 3.

11. Other information, if any:

12. Details of Enclosures: (Attach a list)

DECLARATION:

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time I am found to have concealed / distorted any material, information, my appointment shall be liable to be summarily terminated without any notice.

Place:

Date:

Signature of the Candidate