LABORATORIES TEXTILES COMMITTEE Govt. of India, Ministry of Textiles

Affix a recent pass port size photograph

APPLICATION FORM

1	Post Applied for	
	(in block letter)	
2	Name of applicant	
	(in block letter)	
3	Father's Name	
4	Present Postal Address for	
	communication (in block letter) with	
	pin code	
5	Contact Details	
	(a) Mobile No.	
	(b) E-mail address	
6	Permanent Address	
0	r ennanent Address	
7	Date of Birth (DD/MM/YYYY)	
	(please attach proof of DoB)	
	Age as on 31 st March, 2024	
	(Years – Months)	
8	Nationality	
	-	
9	Religion	
10	Category (SC/ST/OBC/PH/GEN)	
11	Whether differently abled person?	
	If yes, please give type of disability	
10		
12	Please mention preference place of	
	posting in the order of priority	

13. Educational Qualification starting with Secondary Education: Please attach self attested copies of certificate/mark sheets

Examination /Degree			% of Marks/Division	Subject taken

14. Experience, if any (Please start with latest)

Name of the	Post Held	Period		Last	Nature of Work
Employer		From	То	salary Drawn	

Declaration

I hereby declare that all the statements made in this application are true and complete to the best of my knowledge and belief. I further understand that at any time I am found to have concealed/distorted any material information, my candidature/appointment terminated without any notice. I acknowledge that the position of Project Assistant (Textile Testing) is a purely temporary and short term contractual engagement and does not confer any right for regularization of service in future. I also agree to fully abide by the terms and conditions in this regard.

Date: Place:

Signature of the Candidate with Name