

## INDIAN INSTITUTE OF SCIENCE BANGALORE – 560 012

## APPLICATION FORM FOR THE POST OF SECURITY ASSISTANT (ON CONTRACT) IN THE SECURITY AND FIRE FIGHTING AT THE INSTITUTE

•	Applications other than in this format will not be considered.							
•	Please fill the Application form in Engli letters.	CAPITAL	Please affix here passport size photo and sign across with ink or gel pen					
•	Incomplete applications and without cop be rejected.	ies of ce	ertificates are	liable to				
1.	Name							
2.	Father's Name							
3.	Date of Birth	Date		Month		Year		
4.	Sex	Male		·				
5.	a) Address for Communication							
	b) Telephone No.							
	c) Mobile Phone No.							
	d) e-mail ld (if any)							
6.	Educational Qualification							
7.	Category you belong to	General / OBC / SC / ST						
	OBC in this context refers only to communities recognized as Backward Class under the Government of India' and applicants under this category should enclose alongwith application form a photo (Xerox) copy of 'Certificate to be produced by other Backward Classes applying for appointment to posts under the Government of India. (Download Specimen copy). Otherwise, the Institute is constrained to treat them under General Category.							
	Applicants belonging to SC or ST category should enclose alongwith application form a photo (Xerox) copy of the caste certificate issued by competent authorities							

8.	Details of employment / experience									
(a)	Armed Forces / BSF / CRPF / CISF									
	Rank		:							
	Period of Service		:							
(b)	Others, If any	Others, If any :								
. ,	Organisation	Designation	From	То	Nature of duties					

## DECLARATION

I, the undersigned hereby solemnly declare and affirm that the information furnished by me in the application form and academic profile is true and I have not concealed any information related to the above items. I understand that if any of the above is found untrue or that I have concealed any information, my application or selection or offer stands cancelled and the Institute can take action against me which it deems fit.

Place : Date :

Signature of the Applicant