



1. Name in Full:

2. Personal status: Married ☐ Single ☐ Male ☐ Female ☐

[illegible]

Email id: _____ Mobile No. _____

Fax No. _____

[illegible]

4. Date of Birth:

| | | | | | | | |
|-----|-------|---|---|---|---|--|--|
| | | | | | | | |
| Day | Month | Y | e | a | r | | |

5. Nationality:

6. Present Employment:

7. Category: SC ST OBC PH GN

(For SC/ST/PH/OBC- non creamy layer category pl. attach self attested copy of certificate.)

8. Educational Qualification (Starting with Matriculation):
(Attach a separate sheet if necessary)

| Course | School/College/ University/ Institution | Year of Joining | Year of Leaving | Percentage of marks | Class/ Division |
|--------|--|--------------------|--------------------|------------------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |

9. Intellectual Property Management Courses Attended (if any): (Attach a separate sheet if necessary)

| Course | School/College/ University/ Institution | Date & Year of Joining | Date & Year of Leaving | Percentage of marks | Class/ Division |
|--------|--|------------------------------|------------------------------|------------------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |

10. **Employment Record** in chronological order, ending with present job:
(Attach a separate sheet if necessary)

| Name and Address of Organization | Designation | Dates | | Period (MM-YY) | Pay Scale/Last salary drawn | Nature of Duties (attach separate sheet to provide the details if necessary) |
|-------------------------------------|-------------|-------|----|-------------------|--------------------------------|--|
| | | From | To | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

11. Brief Description of IP Management Experience (to be limited to 1000 words only).
12. Brief Description of Technology Transfer Experience (to be limited to 1000 words only).
13. Patents and Design Registrations: (Please attach separate sheet)
14. A brief summary of industry experience. (Please attach separate sheet)
15. Awards/Recognitions, if any: (Please attach separate sheet)
16. Future Plans (Max. 500 words only) (Please attach separate sheet)
17. Any other relevant information: (Please attach separate sheet)
18. **Write Up: (use separate sheet):**
One page write-up of your appreciation of the role and functions of the position and your appreciation of how you can contribute to the Institute as well as why you consider yourself to be suited for the post.

19. Names and Addresses of three Referees:

| | | | |
|------------------------|--|--|--|
| Name | | | |
| Occupation or Position | | | |
| Address | | | |
| Phone No. | | | |
| Mobile No. | | | |
| E-mail | | | |
| Fax No. | | | |

I hereby declare that all the details furnished above are true to the best of my knowledge and belief.

Date: _____

Place: _____

(Signature of Applicant)

List of Attachments: (Please tick mark against attached documents)

Self attested photo copies of certificates/ testimonials in proof of

- (i) Date of Birth Proof
- (ii) Non-GN Category Proof
- (iii) Educational qualifications
- (iv) Experience certificates

| | |
|---|---|
| Y | N |
| Y | N |
| Y | N |
| Y | N |

Note: An incomplete and/ or erroneous application is likely to be summarily rejected. If any query is not applicable to you, please write NA against it.