

NATIONAL INSTITUTE OF PHARMACEUTICAL EDUCATION AND RESEARCH (NIPER - KOLKATA)

4, RAJA S. C. MULLICK ROAD, JADAVPUR, KOLKATA - 700 032

KOLKATA		APPLICATION 1	FORM	Recent Passport Siz	
ost applied for:					
Advt. No. with	date:				
1) Name o	of the candidate	in full (Block):			
2) Father's	s /Husband's na	me:		···	
3) Sex:				···	
4) Marital	status:			••	
5) Date of	birth:				
6) Place of	f birth:				
7) Nationa	ılity:				
8) Categor	ry (SC/ST/OBC	/UR):		···	
9) Candida	ate's mother ton	gue:		···	
10)Langua	ges known:				
Read		Write	Speak		
11) A 11					
11)Addres	S: 				
a. Perma	nnent:				
b. Prese	nt:				

12)Phone/Mobile number:

13)Email ID:

14) Academic Qualification:

Examination/	School/College/	Year of	Year of	Division/	Subjects
Degree	Council/University	joining	passing	Class	
Secondary					
Higher					
Secondary					
Graduate					
Post					
Graduate					
Any Other					

15)Research Experience:

	Title of Project/Research	University	Duration of	Degree obtained/
			Program	Thesis submitted
				in the year
MS (Pharm)/				
M. Pharma etc.				
Ph.D.				

16)Research publication

Name of the Journal	Year	Title	Vol.	Impact Factors

17)Experience:

Nature of	Designation	Date of	Date of	Reason	Basic salary	Employer's	Remarks
appointment		joining	leaving	for	&	name &	
				leaving	allowances	address	

18)Two ref	erees, who sho	ald be respo	onsible pers	ons but not	relative to the	candidate:	
Name & Addre	ess		Prof	fession		Period for whi candidate is kr	
i)	nal information	:					
ii) 							
iii) 							
20)Extra cu	rricular activiti	es (evidenc	ces are to be	enclosed):			
<u>Declaration</u>							
I declare that the entries made in application are to the best of my knowledge and belief. I shall abide by the rules and regulation of the Institute in respect of employment under reference.							
Date:							
Place:							
					S	Signature of the	candidate