

**COCHIN CANCER RESEARCH CENTRE**

(An Autonomous Institution under Govt. of Kerala)

Govt. Medical College Campus, HMT Colony, Kalamassery, Ernakulam – 683503.

email : kcrckochi@gmail.com, Website: www.ccrk.kerala.gov.in

Phone - 0484-2411700

NON –ACADEMIC POST**APPLICATION FOR THE POST OF.....**

1	Name Of Candidate (in Block Capital Letters as in records)		
2	Sex (Male/Female/Transgender)		
3	Age and Date Birth		
4	Address for communication	District:..... State PIN.....	Passport size photograph to be affixed
5	Permanent Address	District:..... State PIN.....	
6	Category		
7	Mobile/Phone number		
8	Email address		



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9	Educational Qualifications						
Sl No	Examination passed	Discipline/Specialization	School/College/Institute	Board/University	Year of Passing	Marks In %	Class / Grade
10	Professional Experience						
Sl No	Organization	From date	To date	Months	Job profile/Status	Salary	
11	Give Details of computer Knowledge						
12	Specialized training obtained, if any						
13	Nationality & Place of Birth						
14	Name and address of Father/ Mother						

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15	Details of Application fee paid	Amount Rs.....	DD No.....	Bank..... Branch
16	Name and Address of two persons for reference			
17	Details of disciplinary action, if any ,during the employment in previous/ current institution			
18	Whether debarred from appearing for any test conducted by any Central/State, Government/ Quasi Government bodies/ Dismissed from service or convicted by a court of Law. If so, furnish details:			
19	Any other information that is likely to be relevant to this application directly			

Declaration

I hereby declare that all statements made and information furnished in this application are true and complete to the best of my knowledge and belief. I also declare that I have not concealed any material information which may debar my candidature for the post applied for. In the event of suppression or distortion of any fact including age, experience, educational qualification etc. made in my application form, I understand that I will be denied any employment in the Institute and if already employed on any of the posts in the institute, my service will be terminated forthwith.

Place

Date

Name and Signature of the candidate