

आई.सी.एम.आर-रोगवाहक नियंत्रण अनुसंधान केन्द्र ICMR-VECTOR CONTROL RESEARCH CENTRE

Department of Health Research, Ministry of Health & Family Welfare, Govt. of India Indira Nagar, Puducherry 605 006.

APPLICATION FORM FOR ADMISSION TO THE TWO YEAR POST-GRADUATE DEGREE COURSE IN PUBLIC HEALTH ENTOMOLOGY, 2021-23

Tick (\checkmark) in the appropriate box

1.	Name (in BLOCK Letters):	Affix recent Passport size photograph signed by the candidate			
2.	Date of Birth (DD/MM/YY):(Self attested copy of certificate to be enclosed)				
3.	Gender: Male Female Transgender				
4.	Social status: General EWS OBC SC ST (Self attested copy of certificate should be enclosed, if claim is under EWS,OBC, SC, ST)				
5.	Father's/ Guardian's Name:				
6.	Nationality:(Self attested copy of certificate to be enclosed)				
7.	Address to which Communication is to be sent: (in Block letters)				
	E-mail ID:				
	Tel. (with STD Code): Mobile:				
8.	Category under which applying:				
	Category I (Open Competition):				
	Category II A Indian National (In-service): Self Supporting Self Self Supporting Self Self Supporting Self Self Self Self Self Self Self Self				

	Whether permission	on (No objection o	certificate) obtai	ned from em	ployer: Ye	: Yes No			
	Category II B (Foreign Nationals) Self Supporting Sponsored Sponsoring Organization:								
	No. of years of ser								
	Whether permission (No objection certificate) obtained from employer: Yes No								
	Name and Address of Employer/Referee including Email ID, Telephone No. & Fax No. with country code:								
	Candidate's Passp								
	Passport Number:								
	Place of issue:								
	Date of expiry:								
	Dute of expiry		•••••	•••••					
9.	Particulars of Dem	and Draft drawn	#						
	Name of the Bank: Branch: Branch:								
	DD amount:								
	# Foreign Nationals: Please see admission notice								
10.	Educational qualif	•	,			,	_		
	Examination	Board/	Subjects	Course	Year of	Marks (%) /			
	Passed	University	studied	duration	passing	Grade/ Class			
	Graduate					Final:			
	Degree*								
						Awaiting results:			
						(upto last exam)			
	XII (H.Sc)/PUC/						-		
	Pre- Degree								
	The Degree								
	X Std.								
	i .	i e	i e		1	i .			

(Self attested copies of certificates to be enclosed)

Note: Foreign Nationals should submit the following on admission

- i. Equivalent Certificate obtained from Association of Indian Universities, New Delhi
- ii. Eligibility Certificate obtained from Pondicherry University, Puducherry

^{*} Recognized by Pondicherry University, Puducherry

DECLARATION

I hereby declare that the statements furnished by me in the application and the documents submitted in support of my application are TRUE, COMPLETE AND CORRECT to the best of my knowledge and belief. If admitted to the course, I agree to abide by all the existing and future rules and regulations of the Pondicherry University, and the ICMR-Vector Control Research Centre, Puducherry.

Place:		Signature of the Candidate
Date:		
	CHECK LIST	
Tick wł	nether the self attested copies of the certificate and other do	ocuments, in support of the
<u>applica</u>	tion are enclosed, as given under	
1.	Degree certificate	
2.	Statement of marks of the qualifying examination/ upto last examination	
3.	Nationality certificate	
4.	Certificate for proof of age	
5.	Income & Asset Certificate to be produced if claimed under Economically Weaker Section	
6.	Community certificate, if claimed under OBC, SC, ST	
7.	No objection certificate from employer, if applicable	
8.	Certificate of Sponsorship, if applicable	
9.	Demand Draft towards application fee	