

**APPLICATION FOR THE POST OF DIRECTOR GENERAL, SEMI-CONDUCTOR LABORATORY (SCL)**

PART – I

PROFORMA FOR APPLICATION

Mode of Recruitment : (A) Direct Recruitment  
(B) Deputation

***(Please tick the relevant option)***

1. Name in full :

Affix passport size  
photograph

2. Name and Address :  
(In Block Letters)

3. Father's name :

4. Sex : Male / Female

5. Nationality :

6. Date of Birth :  
(*Proof of Date of Birth must be enclosed*)

7. Age: : \_\_\_\_\_ Y \_\_\_\_\_ M \_\_\_\_\_ D  
(*As on closing date of application*)

8. Marital Status :

9. Whether belong to :  
SC/ST/OBC/PH/General  
(*in case of SC/ST/OBC/PH proof shall be enclosed*)

10. Address for correspondence (with pin code):  
(*Tel.No., Mobile No. FAX & e-mail, if any*)

11. Permanent Address :

12. Academic & Professional Qualifications:  
(Beginning with Graduation)

Name of the Instt./Board/University	Year of passing	Examination / Degree	Percentage of marks in Aggregate and Division

*(Specify the gap with reasons in Education career)*

13. Field of Specialization:

14. Resume of Research work and publications:  
*(One set of reprints to be furnished, if available)*

15. International and/or National Honours/Awards/Recognition received from reputed organisations/institution:

16. International level Scientific Paper and National level Scientific Paper published:  
*(One set of reprints to be furnished, if available)*

17. Patents/Copyrights/Trademarks/IPR granted for technological development or licences and or commercialisation :-

18. Whether you are heading a Govt. organisation/Autonomous Body/PSUs or its unit/units or any major Division or major Project, give complete details:

19. In case you are a Private candidate, provide information related to number of manpower and financial turnover of last two years of the organisation in which you are currently working along with a clarification whether the post held by you is equivalent to Member of Board of Directors of the organisation:

20. Employment history in chronological order (descending order, starting from current job) & experience:

(Attach separate sheet in following format, if necessary)

Name & address of employer/Organization / Institution	Period of service	Designation of the post held	Scale of pay and Basic Pay (with Pay Band & GP)	Detailed description of work	Reasons for leaving each post
	From To				

21. Professional Training:

Organization	Details of Training	Period	
		From	To

22. Achievements in the career which may support your candidature :

23. Details of present employment :

- i) Designation of the post held :
- ii) Scale of pay of the post :
- iii) Total emoluments per month now drawn :  
(with break up – Basic, GP, HRA, DA, TA etc.)
- iv) Whether present post is held on regular / tenure / Deputation or ad-hoc basis and since when :
- v) If on deputation, details of post held on Regular basis / scale of pay and since when :
- vi) Name of the Organization with full address indicating Name and Designation of the contact person And Telephone / FAX number:
- vii) Category of the Organization :
  - (a) Government / State Government
  - (b) PSU / Autonomous Body
  - (c) Private

24. A Vision Statement as to how you plan to take SCL forward as its Director General:

25. Any other information :

**Note: Candidates are requested to enclose the copies of documents for substantiating their all the above given information.**

**Declaration:** I hereby solemnly declare that all the above statements are true and correct to the best of my knowledge and belief. Nothing is false or has been concealed / distorted. If at any time, I am found to have concealed / distorted any material information my appointment shall be liable to summary termination without notice.

Place : \_\_\_\_\_

Signature: \_\_\_\_\_

Date : \_\_\_\_\_

Name of the applicant : \_\_\_\_\_

E-mail ID: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

**PART - II**

(To be filled in by the Competent Authority in the case of candidates who are Presently working in Government / PSU / Autonomous Organizations only)

**Certified that :**

- (i) The information given above by the officer is correct.
- (ii) No Vigilance / Disciplinary Proceedings are either pending or contemplated against the above mentioned officer.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Department: \_\_\_\_\_

Organization: \_\_\_\_\_