

14. Marital status



## ICAR – SCAD Krishi Vigyan Kendra, Thoothukudi Mudivaithanendal Post, Vagaikulam, Thoothukudi Dist| Mail: pckvktut.icar@gov.in| Web:www.scadkvk.org| Ph:0461-2269306

		Application Form	
1.	Name	:	
	Father's / Husband's Name	:	Paste Passport
	Date of Birth		Size Photo
	Age as on closing date		
	Gender	•	
6.	Communication Address	:	
	a. <b>Mobile No.</b>	:	
	b. <b>Email id</b>	:	
7.	Permanent Address	: Same as above	
	a. <b>Mobile No</b>	:	
	b. <b>Email id</b>	:	
8.	Nationality	:	
9.	Religion	:	
10	. Caste	:	
11	.Category	: SC / ST / OBC / Women & Divyang (PH) / G	en
12	.Weather physically challen	ged : Yes / No	
	If yes, please specify	:	
13	.Languages known	:	





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15. Educational qualification

Class	-	School Name	Board	Year of passing	Percentage
S.S.L.C					
H.S.C					

Degree	Specialization	College Name	University Name	Year of passing	Percen tage
U.G:					
P.G:					
Others:					

16. Additional qualification

SI. No	Course	Institution Name	Board	Year of passing	Percentage
1					
2					

17. Experience Details

SI.	Post Held	Name of the Institution	Day Coale	Period		Reason for
No			Pay Scale	From	То	Leaving
1						
2						
3						
4						
5						

18. Award / Medals / Distinction

SI. No	Name of the Award / Fellowship/ Medal	Award instituted by	Details
1			
2			





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SI.	9.Trainings / Seminar / Workshop Name of the Training /Seminar/	Organized by	Date	Duration	
<b>No</b>	Workshop	<b>3 3 3 3 3 3 3 3 3 3</b>			
2					
3					
2	0.Narrate your contribution to ag words)	ricultural extension and Farmers	Welfare (300	)	
	•				
2	1. Write about your suitability to th	nis post (250 words)			
Declaration  I hereby declare that the particulars given above are true and correct. I understand that if any of the particulars are found to be false / incorrect / misrepresented on a later date, my candidature is liable to be cancelled at any time.					
	Place :				
	Date :				
		(Signatu	re of the App	olicant)	
		(Signato	TO OI IIIE APP	,cuiii <i>j</i>	