

## TAMIL NADU DR.J.JAYALALITHAA FISHERIES UNIVERSITY

		AP	PLIC	ATION	I FO	RM								
	(For Technical Posts Only)										Photo			
	Application Number								L					
								(	For	Office	use	Only	/)	
Adver	tisement Number	:												
Date		:												
Applic	cation Fee Details	:												
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Date		:												
Bank		:												
Amou	ınt (Rs.)	:												
Applic	cation for the Post of													
In the	e discipline of													
1	Name of the Applicant													
	(In BLOCK LETTERS)													
2	Father's Name													
	Mother's Name													
	Spouse Name													
3	Date of Birth								1			1		
	Age (as on cut-off date) Enclose Attested Proof			Years				Month	S				days	
4	Place of Birth and Nativity (District and State): Enclose Attested Proof													
5	Gender (√ mark) Male		Fem	ale 🖳			Trans	gend	ler [					

6	Nationali	ty																
7	Commun	ity (√ mark)			OC		BC [	E	ВСМ	N	1BC		DNC		SC [		SCA	
					ST													
	Caste (	f)																
8		tatus (√ mai		Married Single														
9	Permane	nt Address																
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	Village/T   State, Pir	own, District	· · · · · · · · · · · · · · · · · · ·															
	State, Fil	i code)																
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11	Mother T	ongue			1	I			1	ı	l	1	I		1	I		
12	Vernacul	ar Language	in															
12	School /																	
13	To Read	nguages kno	own															
	To Write																	
	To Speak	<																
14	Name of	the Qualifica																1
Name	I Name of the		Period	of s	tudy		Part		Deg	jree/	,	OGI	PA/					
qualif		School/ College/	From		То		ime Full	-	-	loma		Mar	-		Spec	cializ	ation	1
exam	ination	University			. •		time		rece	eived		Perc	ent					
Хс	X or SSLC																	
XII	XII or HSC																	
UG	Degree																	
PG	Degree																	
Ph.D. Degree																		
Note:	Attach atte	ested copies	of certific	cate	s in	supp	ort o	of ea	ach d	legre	e or	dipl	oma	rece	eived	l		

	sent designation ne and designation of the present employer											
Employer	Post Held	Pay Drawn	From	T		Y M						
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study pe	ote: Period spent on study for Master's /Ph.D. degree should not be included except the part time study period. Use a separate sheet if required.										t time	
17	Experien	ce Regardin	<del></del>		-			Administ		- L!		
Experience in	n Po	Post Held		Place of work		Perio	To	Υ	Dur	ation	D	
Teaching			VVOIT		From		10	'	111		D	
Research												
Extension												
Administration	n											
Note: Use a se	eparate sh	eet if requir	ed									
18	Publication	on Details										
а	Research	Paper				First Author				Co-Author		
	National											
	Internati	onal										
	Thesis											
	Research Report/Lab/Field Research				n							
b	Short communication											
С	Abstracts											
d	d Popular articles, published in Journal/ Magazine/ Newspaper Booklet, Pamphlets, etc., prepared											

е	LIST OF BOOKS / BOOK CHA	pters/Manuals	published				
	Title	Year	Author	Co-Author	Publisher		
	Furnish only the number Journal/ Separately and o ed.						
19	Workshop / Seminar / S	ymposia / Sumi	mer Institute/ Refre	esh course Attende	d and conducted		
	Title	At	tended	Cond	ucted		
	Tiuc	From	То	From	То		
	National						
	International						
Note:	Use a separate sheet if re	equired; Enclose	proof				
20	Training Attended and C	Conducted					
	Title	At	tended	Cond	ucted		
		From	То	From	То		
	National						
	International						
Note:	Use a separate sheet if re Guidance of research scho		•	mittee (Enclose Certi	ficate page of Thesis)		
	Degree	Awarded	Subm	itted	In-Progress		
Ph.D.							
M.F.S	6c.,						
Othe	rs						
22	Medals/Awards won		·				
	Name of the award (Indicate)	Year	Award g (Organi	*	Award given for (Purpose of award)		
Inter	national						
Natio	nal						
State							
Unive	ersity						
Socie	ty						
Othe	rs						
Note:	Use a separate sheet if re	equired: Enclose	nroof				

	23	Funds mobilized										
	Ро	osition Name of Research Sc			Funding a		agency Dur		Amount			
L		Pl										
L		Co-Pl										
L	O1	thers										
	24	Patent / In	novation / Te	echnolog	y Transferre	ed (Enclo	se proof)	)				
		Name of the patent/ Innovation / Technology		,	Year	Beneficiary			Utility			
25 Extracurricular Achievements (NCC/NSS/Sports and Games etc.,)												
		Activity			l	Period		Level				
					rom		То		LCVCI			
Ī	Note: Use	e a separate	sheet if requ	uired; Er	nclose proof							
	26	Scale of Pa	y in the Pres	ent Post	and Basic p	ay drawı	n, if alrea	idy emplo	oyed			
	27	Is there an	y commitme	nt to ser	ve any orga	nization?	Yes /	No				
		If yes, furr	nish details.									
	28	Countries	visited, if any	and the	duration an	nd purpos	se of visit	•				
	Country	ntry visited			Duration				of visit			
1	Note: Us	e a separate	sheet if requ	uired; Er	ired; Enclose proof							
29 List three referees known to you who can certify your professional competency												
Name				Addr	Address with Phone number							
ļ												
1	Note: Te	stimonial fro	m referees to	be pro	duced at the	e time of	interview	v				

30	Any Other Information regarding experience, etc., in support of satisfying the eligibility conditions prescribed for the post now applied for.  Note: Use a separate sheet if required.							
31	List of Professional Societies in which you are member and position, if any							
	Professional Society	Position						
Note: E	vidence to be produced at the time of interview							

## 32. DECLARATION

- I solemnly and sincerely affirm that all information furnished in the application are true and correct to be best of my knowledge and belief.
- Should there be any incorrect or false information having been furnished that may come to light in due course, I find myself for such action as the University may decide.
- I understand that I am liable for criminal prosecution and the University has the right to cancel my candidature / selection as the case may be and I would forego my selection and the application fee.
- I further undertake to submit all the required originals at the time of interview process, as per the Tamil Nadu Fisheries University rules, failing which I would forego my interview.

Place:	
Date:	Signature of the Candidate