



UGC Approved

GD GOENKA UNIVERSITY

GURUGRAM SOHNA ROAD

(Annexure-I)

APPLICATION FORM FOR JUNIOR RESEARCH FELLOW (JRF)

1. Name in full (in block letters) _____

2. Address (in block letters)

(i) For Communication _____

_____ Pin Code _____

(ii) Present _____

_____ Pin Code _____

(iii) Permanent _____

_____ Pin Code _____

(iv) E-mail: _____

(v) Phone/Mobile: _____

3. Particulars of age and birth (as per Matriculation or equivalent Certificate)

(i) Date of Birth (DD-MM-YYYY) _____ (ii) Age: _____

(iii) Place of Birth _____ (iv) Nationality: _____

4. Other Particulars:

Gender: _____ Marital Status: _____

Religion: _____

5. Father's Name _____ Mother's Name _____

Spouse Name _____

6. Category (Gen/OBC/SC/ST): _____

(Please attach photocopy of the relevant certificate)

Paste your recent
Passport size
Photograph

7. Academic Record/Other details:

Education level/ Degree	Name of the Board/ University	Year of Passing	Percentage Marks	Remarks, if any
High School (10 th)				
Intermediate (12 th)				
B. Pharm.				
M. Pharm./M.S.				
Any other				

a. Qualifying Examination (GATE/GPAT/CSIR/UGC/LS-NET/Others):

Qualifying Examination (& name of subject)	Branch	Year	Valid Up to	Percentile (& Score)	All India Rank

b. Attach list of publications (Only International) with a clear mention of impact factor (if any):

(i) Give complete list of publications (List SCI journal publications) in the following format:

SI. No.	Author(s)	Month & Year	Title	Complete Reference of Journal (i.e. Page No., Volume No. etc.)	Impact Factor of Journal	Citations of Paper

(Please attach photocopy of the publications)

c. Date of submission of M. Pharm. Thesis: _____

d. Whether currently employed: Y/N: _____

e. Time required to join this position: _____

8. Names and addresses of two referees along with phone number and e-mail addresses.

1.

2.

9. Any other relevant Information (Details of Special achievements, Awards, Trainings, etc., if any):

10. Declaration

I hereby declare that I have carefully read and understood the instructions and particulars on this application and that all entries in this form as well as in the attached sheets are true to the best of my knowledge and belief.

Date:

Place:

Signature of the applicant

List of enclosures: