## **Punjab Biotechnology Incubator**

(A State Govt. Undertaking) SCO: 7&8, Phase-V, SAS Nagar (Mohali)

# admin.pbti.dst@punjab.gov.in PROFORMA-I

(Hard copy to be submitted)

To be filled in by	the candidate			For Office use			
Advt.No. & date &	vt.No. & date & Particulars of ap			Application S. No:	Passport size Photograph		
Post applied for	Demand Draft N			Date of receipt:			
	Date :						
Category (General / Reserved):	Name of the Iss	uing b	ank :				
(in case of reserve, please specify)	Branch		<del></del>				
					•		
1. Name (IN BLOCK LETTERS)		:					
2. Father's Name		:					
3. Date of Birth		:					
4. Age as on last date of application i.e. 20.07.2020		:	уу	mm dd			
5. (a) Postal Address		:					
(b) Permanent Address		:					
6. Phone No. / Mobile No		i					
7. e-mail address		:					
8. Educational / Professional Qualifica (starting from higher to lower)	itions	:					

Exam Passed	Year of Passing			College/ institute	Board/ Univ.	Major Subject	Total Marks	Marks Obtained	%age Marks *
		From	То						

<sup>\*</sup> marks of qualifying degree should be given in %age along with calculating formula for converting from other type of marking system

09. Any additional qualification : (Enclose a separate sheet, if the space is insufficient)

10. Total Experience:	:	
Give detailed experience in		
Annexure-I		
11. Any other achievements	:	
/ /	-	
12. Give names, designations and		
complete addresses and contact	•	
nos. of two References who are		
familiar with your work & conduct		
Tarrillar with your work a conduct		
	<u>I</u>	
Date :		
Place:		
		Signature of the applicant
		<u> </u>
13. List of enclosures: 1	5	5
2		6
3	7	7
		8

### **Details of Experience**

Name of Post Applied For:	
Name of Applicant:	

S. No.	Name of the Organization	Designation with		Duration	1	Detailed Nature of Experience
		pay scales / consolidated salary	From	То	Total Years / Months	
			Total Exper	ience		

(Signature of the applicant)

#### PROFORMA-II

#### (Soft copy to be submitted in word format at admin.pbti.dst@punjab.gov.in)

NAME OF POST	APPLIED FOR	

Sr. Name, Address Date of General/ No and Birth (General/ Contact no. Mobile / e-mail OBC / any					Qualification	(Starting from Graduation le	higher to lowe evel)	r till		Experience			
	address Of the candidate		other)	Degree	Year of Passing	%age*	College / Institute	Board / University	Name of organization			Detailed Nature of	
										From (Month & year)	To (Month & year)	Experience	

<sup>\*</sup> marks of qualifying degree should be given in %age along with calculating formula for converting from other type of marking system