



FLUID CONTROL RESEARCH INSTITUTE

(An Autonomous R&D Institute under Ministry of Heavy Industries, Govt. of India)

Kanjikode West, Palakkad -678 623, Kerala, INDIA.

Phone No: +91-491-2566120, 2566206; Fax: +91-491-2566326; www.fcriindia.com

Email the application to careers@fcriindia.com.

Post applied for			
Notification No./ Date			
Closing Date			
Please Paste your latest Passport size photograph In the space provided on Right (JPG File size: 120kb-500kb)		Photo of Size: 3.5cm x 35 cm	
Applicant's Email ID			
Applicant's Mobile No.			
Alternate Mobile / Landline Telephone No.			
1	Name in full (BLOCK letters)		
2	Aadhaar Number		
3	Driving Licence Number (if any)		
4	Passport Number (if any) & Date of Issue		
5	Father's Name		
6	Mother's Name		
7	Full Address for Communication		
8	Permanent Address in Full		
9	Date of Birth (DD/MM/YYYY) & Age (in Years)	Date:	Years
10	Sex	Male / Female / Others	
11	Marital Status	Married / Unmarried	
12	Nationality	INDIAN / Others (please mention)	
13	State of domicile		
14	Mother tongue		
15	Religion / Caste		



16	Whether OBC? (Please attach relevant documents in support of the claim)	YES / NO OBC-Non-Creamy Layer / OBC-Creamy Layer
17	Do you belong to /Scheduled Caste / Scheduled Tribe/EWS? If YES, state whether SC / ST / EWS (Please attach relevant documents in support of the claim)	YES / NO SC / ST / EWS
18	Languages you can : READ WRITE SPEAK	1..... 2..... 3..... 4..... 1..... 2..... 3..... 4..... 1..... 2..... 3..... 4.....
19	Whether there are any criminal cases pending against you? If YES, please provide Case details including Complaint No. / FIR, etc.	YES / NO

20. Academic Qualifications: List in the chronological order (latest to oldest)

Sl. No.	Qualification [Course & Specialisation]	Institution/ College & University	Period		Percentage	Remarks
			From	To		
A						
B						
C						
D						
E						

21. Details of Internships completed

Sl. No	Organisation	DATE From	DATE To	Department	Details about Internship Training
A					
B					
C					
D					

22. Details of Apprenticeships completed

Sl. No	Organisation	DATE From	DATE To	Department	Details about Apprenticeship
A					
B					

23. Professional Qualifications, Training / Certifications obtained:

Sl. No	Qualification / Certification	Institution	DATE From	DATE To	Remarks (if any)
A					
B					
C					
D					

24. Details of Academic Project undertaken. Separately list the projects at different levels [Graduate/Diploma level, Post-Graduate Level, Research Scholarship (MS/PhD)]

Sl. No	Project Title	Institution	DATE From	DATE To	Your Contribution
A					
B					
C					
D					

25. DETAILS OF EXPERIENCE (Including current Appointment)

Sl. No.	DATE		Employer's Name & Nature of Business	Designation	Gross Monthly Salary		Indicate Reason for leaving
	From	To			Starting	Leaving/ present	
A							
B							



C						
D						
E						
26 (a)	Name Address of Last employer					
26(B))	Contact details of Head of Personnel Dept / Human Resources Dept at the Last Employer		Name: Designation: Department: Email ID: Mobile/Telephone No.:			
27	Have you ever been discharged/dismissed / terminated / or any type of disciplinary action taken against you for misconduct or unsatisfactory service or involved in any court proceedings, if so give details:					
28	Give TWO REFERENCES (not related to you) who are well acquainted with your background, career, character, etc.					
	Name	Designation	Official Address	Email ID & Mobile number		
a						
b						
29	Time required to join duty if selected					

30. DETAILS OF YOUR FAMILY MEMBERS:

Member	Name	Nationality	Place of birth	Occupation	Permanent Address
--------	------	-------------	----------------	------------	-------------------



Father					
Mother					
Spouse					
Brother/Sister s					
31. Details of your current Membership in Professional Bodies / Scientific societies, etc.					

32. Check List: [Documents to be attached with Application Form, to be sent by Email]

- This Application Form fully Filled up, Passport size photograph pasted and finally signed. Take a printout and scan to PDF format File. Send the PDF format File by Email.
- Scanned Copy (single PDF File) of Experience Certificates as proof for experience as per Notification
- Scanned Copy of Certificate(s) regarding Qualifications (single PDF File) and Consolidated Marks Card in Qualifying degree.

33. DECLARATION

I hereby certify that the particulars furnished in this Application are true, correct and complete in all respects. I agree and accept without reservation that if at any time, if any of the particulars provided by me is found to be untrue, incorrect and/or incomplete, my engagement at the institute will be terminated without notice.

I also understand that this application or engagement does not provide me any privilege or preferential rights for future employment at FCRI. That this Application is NOT for a Regular Post for present or future opening(s).

I also declare that I will not engage in any political activities or anti-Institute activities within or outside the Institute premises during the period of engagement.

Place:
Date:

Signature of Applicant



For use of FCRI P&A only