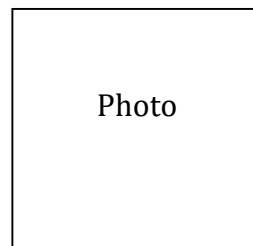


**ICMR – National Institute of Traditional Medicine**  
**Nehru Nagar, Belagavi – 590010**

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APPLICATION FOR ENGAGEMENT AS CONSULTANT  
(ADMINISTRATION)



1.	Name	
2.	Date of Retirement	
3.	Post / Designation held at the time of retirement	
4.	Name of the organization from where retired	
5.	Gross Salary at the time of retirement	
6.	Present Pension drawn	
7.	Postal Address	
8.	Mobile Number	
9.	E-mail ID	
10.	Qualification	
11.	Experience (if necessary, details may be furnished in another sheet)	

**DECLARATION**

I HEREBY DECLARE THAT THE STATEMENT FILLED IN MY APPLICATION IS TRUE AND CORRECT AND NOTHING HAS BEEN CONCEALED. I AM WILLING TO TAKE UP THE ASSIGNMENT WITHIN IMMEDIATELY AFTER GIVEN THE OFFER OF APPOINTMENT.

Date :

Signature