



NATIONAL COUNCIL FOR CEMENT AND BUILDING MATERIALS
(UNDER THE ADMINISTRATIVE CONTROL OF MINISTRY OF COMMERCE & INDUSTRY, GOVT.OF INDIA)
34 KM STONE, MATHURA ROAD, BALLABGARH

APPLICATION FORM FOR PROJECT ASSOCIATE-I AND PROJECT ASSOCIATE-II

The hard copy to be filled by the candidate in his/her own handwriting. All the columns should be properly filled in. Incomplete application form will be rejected summarily.

*Affix recent
passport size
photograph duly
signed by the
candidate*

Advertisement No. : C/03/2025 (02)

1. Post applied for :
2. Name of candidate (in BLOCK Letters) :
3. Marital Status :
4. Father's / Husband Name :
5. Date of Birth : ____ : ____ : ____
6. Age as on 09.04.2025 : ____ Years ____ Month ____ Days
7. Aadhar Card No. /PAN No.
8. Nationality :
9. Address
 - a. Correspondence Address :
 - City & Pin Code :
 - State :
 - Mobile No. :
 - Email ID :

b. Permanent Address :
 City & Pin Code :
 State :
 Mobile No. :
 Email ID :

10. State whether you are a member of : SC
 Schedule Caste/Schedule Tribe/Other ST
 Backward Class. If so, attach an attested OBC
 Copy of the certificate in support of your GEN
 Claim. PWD
 EWS

11. Educational / Professional Qualifications (*a self attested copy of each certificate / marks statement must be enclosed with the application*) :

| | Examination Passed | Course Duration | Division | Percentage * | Year of Passing | Board/ University | Subjects |
|--|--------------------|-----------------|----------|--------------|-----------------|-------------------|----------|
| High School | | | | | | | |
| Intermediate | | | | | | | |
| Diploma | | | | | | | |
| Graduate | | | | | | | |
| Post Graduate | | | | | | | |
| Ph.D Title (Awarded/Thesis Submitted) | | | | | | | |
| Any other | | | | | | | |

* Wherever CGPA is applicable, the same should be indicated in equivalent actual percentage.

12. Total Experience : Years _____ Months _____

13. Employment Details in (Chronological Order starting from current occupation):

| Name & Address of Employer | Post Held | Pay Scale | Date From | Date to | Nature of Duties |
|----------------------------|-----------|-----------|-----------|---------|------------------|
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(Any additional information may be given in additional sheets)

14. CSIR-UGC NET including :
Lectureship (year; roll no., rank)

15. GATE (year; registration no.; valid :
score; rank)

16. Number of publication in SCI :
journals, if any (attach photocopy of
first page)

Declaration: I _____ hereby declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief and in the event of any of the information being found false or incorrect or any ineligibility being detected before or after the selection, my candidature is liable to be cancelled and action initiated against me.

Date:

Candidate's Signature

Place:

(_____)
Full Name