



Regional Science Centre  
(CENTRAL RESEARCH & TRAINING LABORATORY)  
A constituent unit of National Council of Science Museums(NCSM)  
Pandit Jawaharlal Nehru Marg, Bhubaneswar-751013



**Bio-Data**

Paste recent colour  
passport size  
photograph &  
signed across

**Name of the Discipline** : Trainee (Education) (Pure Science/Life Science)

**Name (in BLOCK LETTER)** : Shri/Smt./Ms.\_\_\_\_\_

**Father's / Husband's Name** : \_\_\_\_\_

**Present Address** : \_\_\_\_\_  
\_\_\_\_\_

**Permanent Address** : \_\_\_\_\_  
\_\_\_\_\_

**Date of Birth** : \_\_\_\_\_

**Contact No.** : \_\_\_\_\_

**Email Id.** : \_\_\_\_\_

**Community**  
(Gen./ SC/ST / OBC) : \_\_\_\_\_

**Aadhaar/PAN No.** : \_\_\_\_\_

**Are you Physically Handicapped** : Yes / No  
(If yes, please submit PH certificate)

**Educational Qualifications** :  
[Starting from Madhyamik (10<sup>th</sup> Class) or equivalent]

| Sl. No. | Name of the Examination Passed | Division/Grade | Year of Passing |
|---------|--------------------------------|----------------|-----------------|
|         |                                |                |                 |
|         |                                |                |                 |
|         |                                |                |                 |
|         |                                |                |                 |

Please use separate page if required

**Technical Qualifications, if any :**

| <b>Sl. No.</b> | <b>Name of the Examination Passed</b> | <b>Division/Grade</b> | <b>Year of Passing</b> |
|----------------|---------------------------------------|-----------------------|------------------------|
|                |                                       |                       |                        |
|                |                                       |                       |                        |
|                |                                       |                       |                        |

**Work Experience :**

| <b>Sl. No.</b> | <b>Name of the Organisation</b> | <b>Post Held</b> | <b>Tenure</b>  |                |
|----------------|---------------------------------|------------------|----------------|----------------|
|                |                                 |                  | <b>Joining</b> | <b>Leaving</b> |
|                |                                 |                  |                |                |
|                |                                 |                  |                |                |
|                |                                 |                  |                |                |

Whether undergone traineeship : YES / NO  
at any unit of NCSM  
(If yes, then you are not eligible for this traineeship)

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Signature of the Candidate

Date:

***N.B: Attested photocopies of supporting documents should be submitted along with the Bio-data.***