APPLICATION FORMAT

NATIONAL INSTITUTE OF SOWA-RIGPA, LEH

(MINISTRY OF AYUSH, Govt. Of India)

1.	Post applied for								
2.	Name								
3.	Date of Birth								
4.	Father's Name							_	
5.	Correspondence Address							Photo	
6.	Permanent Address								
7.	Mobile No. & Email ID								
8. Edu	cational Qualifications:								
S.No.	Name of Board/University	Degree		Year o passin		% of Marks	Sub	ojects	
1.					_				
2.									
3.									
4.									
9. Experience:									
S.No.	Institute/Location	Worked from (Date)			Position / Job Profile		Total Duration		
1.									
2.									

3.			
4.			
5.			

It is certified that the information furnished above is correct and true to the best of my knowledge.

Place:

Date:

Signature of Applicant

List of Encl.:

- 1.
- 2.
- 3.
- 4.
- 5.