



आई.सी.एम.आर-रोगवाहक नियंत्रण अनुसंधान केन्द्र  
ICMR-VECTOR CONTROL RESEARCH CENTRE

Department of Health Research, Ministry of Health & Family Welfare, Govt. of India  
Indira Nagar, Puducherry 605 006.

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APPLICATION FORM FOR ADMISSION TO THE TWO YEAR POST-GRADUATE DEGREE COURSE IN  
PUBLIC HEALTH ENTOMOLOGY, 2019 – 21

Tick (✓) in the appropriate box

1. Name (in BLOCK Letters): .....  
(as per Academic Records)

2. Date of Birth (DD/MM/YY): .....  
(Self attested copy of certificate to be enclosed)

3. Gender: Male  Female  Transgender

4. Social status:  
General  OBC  SC  ST   
(Self attested copy of certificate should be enclosed, if claim is under OBC, SC, ST)

5. Father's/ Guardian's Name: .....

6. Nationality: .....  
(Self attested copy of certificate to be enclosed)

7. Address to which Communication is to be sent:  
(in Block letters)

.....  
.....  
.....  
.....

E-mail ID: .....

Tel. (with STD Code): ..... Mobile: .....

8. Category under which applying:

**Category I** (Open Competition):

**Category II A** Indian National (In-service): Self Supporting  Sponsored

Present Designation: .....

No. of years of service: .....

Affix recent  
Passport size  
photograph  
signed by the  
candidate

Address of Institution/Organization: .....  
 .....  
 .....  
 Whether permission (No objection certificate) obtained from employer: Yes  No

**Category II B** (Foreign Nationals) Self Supporting  Sponsored   
 Sponsoring Organization: .....  
 .....

No. of years of service: .....  
 Whether permission (No objection certificate) obtained from employer: Yes  No   
 Name and Address of Employer/Referee including Email ID, Telephone No. & Fax No. with country code: .....  
 .....  
 .....

**Candidate's Passport details:**

Passport Number: .....  
 Place of issue: .....  
 Date of issue: .....  
 Date of expiry: .....

9. Particulars of Demand Draft drawn #

Name of the Bank: ..... Branch: .....  
 DD amount: ..... Number: ..... Date: .....  
 # Foreign Nationals: Please see admission notice

10. Educational qualification

Examination Passed	Board/ University	Subjects studied	Course duration	Year of passing	Marks (%) / Grade/ Class
Graduate Degree*					Final:
					Awaiting results: (upto last exam)
XII (H.Sc)/PUC/ Pre- Degree					
X Std.					

(Self attested copies of certificates to be enclosed)

\* Recognized by Pondicherry University, Puducherry

**Note:** Foreign Nationals should submit the following on admission

- i. Equivalent Certificate obtained from Association of Indian Universities, New Delhi
- ii. Eligibility Certificate obtained from Pondicherry University, Puducherry

### **DECLARATION**

I hereby declare that the statements furnished by me in the application and the documents submitted in support of my application are TRUE, COMPLETE AND CORRECT to the best of my knowledge and belief. If admitted to the course, I agree to abide by all the existing and future rules and regulations of the Pondicherry University, and the ICMR-Vector Control Research Centre, Puducherry.

Place:

Signature of the Candidate

Date:

### **CHECK LIST**

Tick whether the self attested copies of the certificate and other documents, in support of the application are enclosed, as given under

- |   |                          |
|---|--------------------------|
| 1. Degree certificate   | <input type="checkbox"/> |
| 2. Statement of marks of the qualifying examination/<br>upto last examination | <input type="checkbox"/> |
| 3. Nationality certificate  | <input type="checkbox"/> |
| 4. Certificate for proof of age   | <input type="checkbox"/> |
| 5. Community certificate, if claim is under OBC, SC, ST                       | <input type="checkbox"/> |
| 6. No objection certificate from employer, if applicable                      | <input type="checkbox"/> |
| 7. Certificate of Sponsorship, if applicable                                  | <input type="checkbox"/> |
| 8. Demand Draft towards application fee                                       | <input type="checkbox"/> |