

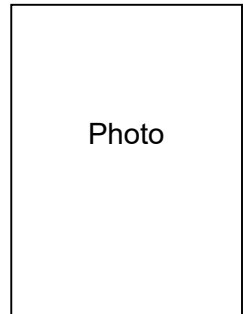
Annexure I

Application for Consultant at C-DAC, Trivandrum

NATURE OF SERVICE: Consultant (Full time)

I. NAME :

II. ADDRESS :



III. TELEPHONE :

MOBILE :

E MAIL :

IV. DETAILS OF QUALIFICATION (Please attach self attested copies)

| Sl No | Qualification | Year of pass | College & University | % of Marks (Also mention Rank/Class) |
|-------|---------------|--------------|----------------------|--------------------------------------|
| | | | | |

V. DETAILS OF PROFESSIONAL EXPERIENCE (Please attach documents to prove the experience)

| Sl.No | Name and Address of the Organization/Firm | From (dd/mm/yy) | To (dd/mm/yy) |
|-------|---|--------------------|------------------|
| | | | |

Name and signature of the applicant

Place:
Date