

**Bio-Data**

**Name of the Discipline** : **Trainee (Education)**

**Name** (*in block letters*) :

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

**Present Address** :

**Permanent Address** :

**Date of Birth** :

**Contact No.** :

**Email Id.** :

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

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

**Educational Qualifications** :  
*(Starting from Madhyamik)*

Name of the Examination Passed	Division/Grade	Year of Passing

**Technical Qualifications** :

Name of the Examination Passed	Division/Grade	Year of Passing

Whether undergone **Traineeship** at Science City/ : YES/NO  
Birla Industrial & Technological Museum/Central Research  
& Training Laboratory, Kolkata/ Regional Science Centre, Guwahati  
*(If yes, then you are not eligible for this traineeship)*

\_\_\_\_\_  
Signature of the Candidate

Date:

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