CAPTAIN SRINIVASA MURTHY REGIONAL AYURVEDA DRUG DEVELOPMENT INSTITUTE

Central Council for Research in Ayurvedic Sciences,

Ministry of AYUSH, Government of India,

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APPLICATION FORM 1. Name of the post applied for: Advertisement No: 2. Name & Address: Affix recent (in block letters) Passport size Photograph Ph/Mobile No: E- mail id:-----3. Date of Birth: (in Christian Era):-----Male: Female: 4. Sex: 5. Community (GEN/SC/ST/OBC/PH): 6. Educational Qualification (Starting from High School): S. Examination Year Name of the Subjects Division No passed School/College/University

7. Experience (Academic/Research)

Place:

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