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| **Application Form (No.** **PGD/19-20/Form-1)**  ***One year full time Post Graduate Diploma (PGD) Programme (Session: 2019-20)***  ***PGDAMT (Post Graduate Diploma in Advanced Manufacturing Technology)*** | | | | | | | |
| **Application Procedure**  Application form to be downloaded and filled up. Scanned copy of duly filled up application form along with the printout of payment receipt should be e-mailed to [coordinator.cmeri@acsir.res.in](mailto:coordinator.cmeri@acsir.res.in) so as to reach by **31.05.2019 (i.e., application closing date).**  Hard copy of duly filled up application form and payment receipt should be sent to the following address, so that the same reaches before the date of **Aptitude test/ Interview** (**i.e., 08.07.2019**). | | | | | | | |
| **Postal Address**  The Coordinator, AcSIR  CSIR-Central Mechanical Engineering Research Institute  MG Avenue, Durgapur – 713 209 [W.B.] | | | **Contacts**  9434330540 (PGDAMT) | | | Paste your recent passport size photograph here | |
| **Payment of Application Fee (Rs. 200/-)**   * Fee can be paid through online mode through SBI portal at   <https://www.onlinesbi.com/sbicollect/icollecthome.htm?corpID=377679>  or by visiting https://www.cmeri.res.in -> Opportunity -> Online Payment  ***Exemption:*** *SC/ST/PWD/Women candidates are exempted from application fee* | | | | | |
| **Personal Information** | | | | | | | |
| Name (in Block Letters) | |  | | | | | |
| Date of Birth | |  | | | | | |
| Nationality | |  | | | | | |
| Gender | |  | | | | | |
| Father’s Name | |  | | | | | |
| Mother’s Name | |  | | | | | |
| Category (SC/ST/OBC/PWD) | |  | | | | | |
| Whether Physically Handicapped (Y/N) | |  | | | | | |
| Address for communication | |  | | | | | |
| Permanent Address | |  | | | | | |
| E-mail ID | |  | | | | | |
| Landline no. and Mobile no. | |  | | | | | |
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| **Application Fee Payment Detail** | | | | | | | | |
| Date of Payment |  | | | Transaction Id |  | | | |
| Mode of Payment |  | | | Amount |  | | | |

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| **Educational Qualifications (commencing from 10th standard)** | | | | | |
| **Examination** | **Board/University** | **Stream/Major Subject(s)** | **Year of passing** | **CGPA/% marks** | **Evaluation system** |
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| **Experience, if any** |
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| **GATE examination Detail** | | | | |
| Subject | Registration/Roll no. | Date of examination | Rank/Score | Valid up to |
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**Declaration**

I ………………………………………………declare that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief and nothing has been concealed or distorted. I understand that in the event of any information being found false or incorrect at any stage, my candidature/admission is liable to be cancelled/terminated without notice.

Place: (Candidate’s Signature)

Date: