

State Medicinal Plants Board, Kerala
Shornur Road, Thiruvambady P.O, Thrissur -22.
Phone: 0487-2323151, www.smpbkerala.org

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APPLICATION FORM

Application for the post of Secretarial Assistant on contract basis in the office of
State Medicinal Plants Board, Kerala vide Notification No: SMPB/KL/07/2020 dated:
20.04.2021

1. Full Name of the Candidate (in block letters) :
2. (i) Date of Birth (in figures & words) :
- (ii) Age (as on 01.01.2021) :

| Year | Month | Days |
|------|-------|------|
| | | |
3. Nationality :
4. Gender :
5. Marital status :
- 6 Religion and Caste :
7. Whether belongs to SC/ST/OBC :
- 8 Permanent Address (with Pin Code) :

9. Address to which communication to be sent :
(E-mail, Phone No and Mobile No.)

10. Educational qualification

| Sl.No. | Qualification | Board/University | Year | % of marks |
|--------|---------------|------------------|------|------------|
| | | | | |
| | | | | |
| | | | | |

11. Experience:

| Sl.No | Post held | Institution | Period | |
|-------|-----------|-------------|--------|----|
| | | | From | To |
| | | | | |
| | | | | |
| | | | | |

12. Others if any:

DECLARATION

I do hereby declare that the statements made and information furnished above and the enclosures there submitted by me are true.

Place:

Date :

Signature of the Candidate