**UNIVERSITY OF THE PUNJAB**

**APPLICATION FORM**

Affix photograph

## INSTRUCTIONS

1. Each question should be answered clearly and completely.
The application must be filled in and signed by the applicant.
2. Attested copies of Certificates and three passport size photographs should be submitted

with the application.

(3) Canvassing in any form will disqualify.

1. Application for the post of (Please tick one position or multiple positions)

 ⬜ Post-doctoral Fellowship

 ⬜ Research Associate

 ⬜ Research Assistant/PhD student

 ⬜ Research Assistant/MPhil Student

 ⬜ Short Term Project Personal (Research Technician)

 ⬜ Short Term Project Personal (Office/computer/Data Assistant)

Please tick for position(s) in following one or multiple research grants

⬜ Development of recombinant viral vector vaccines against inclusion body hepatitis – hydropericardium syndrome for poultry industry (SBS and NIBGE)

⬜ Development of indigenous recombinant human adenovirus 5-based vector vaccines against SARS-CoV-2 and its emerging variants (SBS, NIBGE and CUVAS)

⬜ Development, production and commercialization of VP2 viral vector vaccine for infectious bursal disease (Gumboro) (SBS, NIBGE, NRLPD-NARC)

1. Name of applicant ……………………………………………………………………………………….
 (In block letter)
2. Date of birth (in figures and words) …………………………………………….……………………..…..

4. Father's Name …………………………………………………………….…………..…………………..

 (In block letters)

1. Present address ………………………………………………………………….………………………..

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 Email: ………………………………………………..……… Mobile:………………………………….
2. Permanent address …………………………………………………………….……….……………

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1. Government of Pakistan Identity Card No ………………………………………………………….…...

1. Personal Mark of Identification as given in the Identity Card ………………………….…………….…...
2. Academic Qualifications:

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| --- | --- | --- | --- | --- |
| **Name of ExaminationPassed** | **Year of Passing** | **Institution attended** | **Grade/Division with marks obtained** | **Subjects studied** |
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1. Experience, including past University service, if any:

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| --- | --- | --- |
| **Name of Institution served** | **Capacity in which served** | **Dates From : ……. To** |
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1. List of documents attached:
2. CNIC and a latest photograph of the candidate □
3. Curriculum vitae □
4. Attested copies of educational certificates □
5. Attested testimonials/experience certificate □
6. Any other □

I solemnly declare that the information given above is correct. In the event of any part of the information being wrong, I shall be liable to disciplinary action, including dismissal from service.

Date

 Signature of the applicant

FOR OFFICE USE ONLY

(Muhammad Abid)

Administrative Officer