

**PLEASE FILL UP ALL THE COLOUMNS AND SIGN WELL IN ADVANCE  
AND SUBMIT ON THE DATE OF WRITTEN TEST  
PLEASE CARRY ALL THE ORIGINAL DOCUMENTS, ID PROOF, ETC. ALONGWITH  
ONE SET OF PHOTOCOPIES**



**Science City**  
(National Council of Science Museums)  
Ministry of Culture, Government of India  
J. B. S. Haldane Avenue, Kolkata: 700 046



**FORM OF APPLICATION FOR TRAINEESHIP**

*Those who have already completed traineeship in any units of NCSM are not eligible for the same.*

1. Name in full (Block letters) :
2. Address:
  - A) Present :
  - B) Permanent :
3. Date and Place of Birth :
4. Father's Name/\*Guardian's name address & occupation :
5. Are you a citizen of India by birth and / or domicile? :
6. Caste Certificate :
7. Are you Physically Handicapped :
8. Particulars of all Examinations passed and degree and technical qualifications obtained, if any and class in which passed

**Affix recent  
passport size  
photograph with  
self-attestation**

Examination or Degree Passed And Board/University	Class or Division	Subject Taken	Year
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9. What Languages you can read , write and speak (Please tick in the appropriate column/s) :
 

READ	WRITE	SPEAK
10. Contact No.
  - A) Mobile No. :
  - B) Land Line No., if any :
11. Whether you have completed Traineeship in any of the units under NCSM :
12. List of enclosures (Photocopy of all the documents duly self attested mentioned in the Sl. No. **3,4,6,7,8**)
  1. 4.
  2. 5.
  3. 6.

\*In case of married women the name of the husband may be furnished

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**Signature of the Candiate**