



**Application Form**  
**Indian Association for the Cultivation of Science, Kolkata**

**Advt. No. IACS/Advt/354      Dated 20.03.2026**

Post Applied For	:	
Name in full (IN BLOCK LETTERS)	:	

1	Date of Birth (DD-MM-YYYY)	:	
	Age as on closing date of application	:	
2	Gender (Male / Female etc.)	:	
3	Nationality	:	
4	Category: [UR/SC/ST/OBC-NCL/EWS]	:	
5	Father's / Husband's Name	:	
	Occupation & Address	:	
6	Marital Status (Married/Unmarried etc.)	:	
7	Valid Photo ID No. [ <input type="checkbox"/> Aadhaar/ <input type="checkbox"/> PAN]	:	
8	Are you willing to accept the minimum initial pay? If not, state the lowest initial pay acceptable to you.	:	
9	Permanent Address with PIN Code	:	
10	Address for Correspondence with PIN Code	:	
	Mobile No.	:	
	Email id	:	

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11 Educational Qualifications (Matriculation onwards)						
Exam Passed	Name of University/ Institute/ Board	Joining (Mth-Year)	Completion (Mth-Year)	Main Subjects/discipline	Percentage of Marks	
Secondary (10 <sup>th</sup> Level)						
Higher Secondary (12 <sup>th</sup> Level)						

[Add rows, if required]

(Full signature of the applicant)



**Annexure-I**

**The form of certificate to be produced by Government servants for claiming Age concession**

**(Letter Head of the Institution/Issuing Authority)**

This is to certify that Shri/Ms.....S/o,D/o,W/o Shri.....is a regularly appointed n employee of this Organization/Department/Ministry and duties performed by him/her during the period(s) are as under

Certified that:

\*(a) Shri/Shrimati/Kum. .... holds substantively a permanent post of .....in the Office/Department of .....with effect from .....

\*(b) Shri/Smt./Kum..... has been continuously in temporary service on a regular basis under the Central Government in the post of .....in the Office/Department.....with effect from .....

Signature.....

Name.....

Designation .....

Ministry/Office.....

Address.....

Office SEAL.....

Place: .....

Date: .....

**Annexure-II**

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES  
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri/Smt./Kumari\_\_\_\_\_son/daughter of  
\_\_\_\_\_of village/town\_\_\_\_\_  
in District/ Division\_\_\_\_\_in the State/Union Territory  
\_\_\_\_\_belongs to the \_\_\_\_\_community  
which is recognized as a backward class under the Government of India, Ministry of Social Justice  
and Empowerment's Resolution No.\_\_\_\_\_dated  
\_\_\_\_\_.Shri/Smt./Kumari\_\_\_\_\_and/or his/her family  
ordinarily reside(s) in the \_\_\_\_\_District/Division of the  
\_\_\_\_\_State/Union Territory. This is also to certify that he/she does not  
belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the  
Government of India, Department of Personnel & Training O.M. No.36012/22/93-Estt.(SCT) dated  
8.9.1993\*\*.

District Magistrate  
Deputy Commissioner etc.

Dated:

Seal

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\*- The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

\*\* -As amended from time to time.

Note:- The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

### Annexure-III

#### **Form of declaration to be submitted by the candidate (in addition to the community certificate)**

I.....son/daughter of Shri.....resident of village/town/city.....district .....State ..... hereby declare that I belong to the ....,community which is recognized as a backward class by the Government of India for the purpose of reservation in services as per orders contained in Department of Personnel and Training Office Memorandum No. 36102/22/93-Estt(SCT) dated 8.09.1993. It is also declared that I have read and understood the instructions contained in the said DoP&T OM dated 8.09.1993, and OM No. 36033/1/2013-Estt.(Res.) dated 13.09.2017 and I have reasons to declare that I do not fall under OBC (Creamy Layer) category on the basis of income for the immediate preceding three financial years.

Signature.....

Full Name.....

Address.....

**Annexure-IV**

**Government of .....**  
**(Name & Address of the authority issuing the certificate)**

**INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS**

Certificate No. \_\_\_\_\_

Date: \_\_\_\_\_

**VALID FOR THE YEAR \_\_\_\_\_**

1. This is to certify that Shri/Smt./Kumari \_\_\_\_\_ son/daughter/wife of \_\_\_\_\_ permanent resident of \_\_\_\_\_, Village/Street \_\_\_\_\_ Post Office \_\_\_\_\_ District \_\_\_\_\_ in the State/Union Territory \_\_\_\_\_ Pin Code \_\_\_\_\_ whose photograph in attested below belongs to Economically Weaker Sections, since the gross annual income\* of his/her **“family”**\*\* is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year \_\_\_\_\_. His/her family does not own or possess any of the following assets\*\*\*:

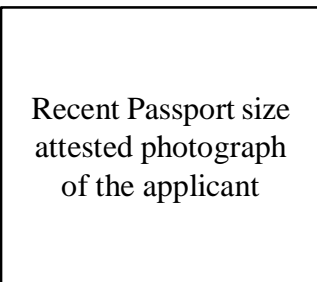
- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari \_\_\_\_\_ belongs to the \_\_\_\_\_ caste which is not recognized as a Schedule Caste, Schedule Tribe and Other Backward Classes (Central List).

Signature with seal of Officer \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_



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\* **Note1:** Income covered all sources i.e. salary, agricultural, business, profession, etc.

\*\* **Note2:** The term **“Family”** for this purpose include the person, who seeks benefit of reservation, his/her parents are siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.

\*\*\* **Note3:** The property held by a **“Family”** in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.