



राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान (नाईपर)
National Institute of Pharmaceutical Education & Research (NIPER)
सैक्टर-67, एस° ए° एस° नगर (मोहाली), पंजाब - 160062

APPLICATION FORM FOR THE PROJECT VACANCIES- PROJECT SCIENTIST-I (GP-492)
(TO BE FILLED BY THE APPLICANT IN BLOCK LETTERS, NO PART OF THE FORM SHOULD BE LEFT BLANK)

Advertisement No.: **Advt. No. 21/2025, dated 04.12.2025**

Post Applied for: **PROJECT SCIENTIST-I** under ICMR sponsored Project (GP-492) titled as
"Overcoming the nephrotoxicity and oral delivery challenges of Amphotericin B vis strategic prodrug and nanomedicine approaches" [PI: Prof. Sanyog Jain, Department of Pharmaceutics]

Please affix
a recent
passport size
photograph

Fee Paid: Rs. 500/- DD No. & Date:

OR **EXEMPTED** [Please refer Clause No. 5(ii) of the advertisement and mention category:

1. Name of the applicant

Married ☐ Single ☐ Male ☐ Female ☐

2. Father's Name ☐ / Husband's Name ☐ (please tick)

3. Address: Present (for communication)

PIN

4. Address: Permanent

PIN

Fax:

E-Mail:

Telephone:

Office:

Residence:

5. Date of Birth Day Month Year

7. Age as on the: Years/months/days
date of walk-in-interview i.e. on 22.12.2025

6. Nationality:

7. Present Employment, if any:

Designation:	
Organisation:	
Date of Joining:	
Pay Scale / Pay Band (PB)	
Pay in PB + Grade Pay (GP) / AGP	
Total Emoluments (Per month)(Rs.):	

8. Tick-Mark the appropriate Box (Please attach a copy of the documentary proof)

GEN ☐ SC ☐ ST ☐ OBC ☐ PH ☐ XSM ☐

9. Total years of the experience after attaining essential qualification:

10. Areas of specialization

11. Current areas of Research

12. Academic Record starting with secondary education (Please attach photo copies of certificates/Mark Sheets etc.)

Examination	Branch/ Specialization	Board/College/ Univ./ Institution.	Year of passing & degree awarded	%age of marks	Division

13. Employment, if any (Please attach photo copies of experience certificates)

Employer	Position held (Regular / Contractual)	Duration (Exact dates to be given)		Total period (yy/mm/dd)	Basic pay with scale of pay	Detailed description about nature of duties performed & performing*
		From	To			
		/ /	/ /			
		/ /	/ /			
		/ /	/ /			
		/ /	/ /			

*Please attach separate sheet (s) with complete description of the duties performed & being performed, failing which, application may not be considered.

14. Special Awards/Honours received, if any:

Year	Name of award/honour	Name of organization

15. Membership of professional bodies:

Name of the Body	Status of Membership: Life/Annual

16. Please mention below best five research publications and attach separate list of all publications (To be filled only by the applicant)

Sr. No.	Year	Title of Publication	Name of Journal
i			
ii			
iii			
iv			
v			

17. Name & Address of three Referees:

	Name	Occupation/Position	Official Address	Contact Information
1.				Phone: Fax: Email:
2.				Phone: Fax: Email:
3.				Phone: Fax: Email:

DECLARATION

I, do hereby solemnly declare that the information given, the statements made and documents attached with this application form are correct and true to the best of my knowledge and belief. If any information/statement/document is found to be incorrect/false, my candidature/appointment is liable to be cancelled.

There are _____ attached sheets along with this form.

Date:

Place:

(Signature of the applicant)

(Note: Use separate sheet if necessary for any of the above items.)