

ICAR - National Academy of Agricultural Research Management
Rajendranagar, Hyderabad 500 030

BI ODATA OF ARS SCI ENTI ST ON PROBATI ON

Affix photo

1. FOCARS batch No : _____
2. Name (Block letters) : _____
3. Father's Name :
4. Permanent Address :
5. Address for Communication:
6. Mobile Number & Email ID :
7. Sex : Male / Female
8. (a) Date of Birth : (DD/MM/YY) ____/____/____ (b) Age (in completed years) _____
9. Discipline in ARS : _____
10. Year of Qualifying ARS Exam : _____
11. Date of Joining ARS : (Month & Year) _____
12. Length of Past Service (If applicable) : _____ years _____ months

13. Details of Education

Level of Study	Name of the Degree	University / Institution	Year of Passing
UG			
PG (Discipline)			
Ph.D. (Discipline)			
Other			

(for coordinators use)

14. Blood Group : _____
15. Marital Status : Married / Single

16. Background: Rural / Urban

17. Native District & State: _____
(Items 12 & 13 may be filled in considering the major part of school education)

18. Proficiency in Indian languages beginning with mother tongue (Tick Mark)

Sl. No	Indian Languages known	Read	Write	Understand	Speak
A	(Mother tongue)				
B					
C					
D					
E					

19. Working knowledge in Computers

20. Extracurricular interests:
(Games, sports, etc.)

21. Hobbies:

22. Person (s) relationship & their contacts (nos) :
in case of emergency

Date:

Place:

Signature

Please fill in this form and send it to
In-charge, Academic Cell, ICAR-NAARM, Rajendranagar, Hyderabad – 500 030