

CURRICULUM VITAE OF RESEARCHER WITH DECLARATION

Name :
Permanent address :
Official address :
Phone No : Landline: Office:
Mobile:
Email address :
Date of Birth :
Sex :
Marital status :
Name of guardian :
Religion :
Nationality :
Professional qualification :
Designation :
Professional experience :
KNMC registration: : RN: RM:

DECLARATION

I hereby declare that the above information given is true and correct to the best of my knowledge and I am responsible for the same.

Place:

Date:

Name and signature of the researcher with date: