## SUGARCANE RESEARCH INSTITUTE APPLICATION FOR THE POST OF SENIOR TECHNOLOGY TRANSFER OFFICER/ SENIOR RESEARCH OFFICER

## (Delete the inapplicable post)

1.	Personal Details					
	Name in 1	Full				
	Address					
	Contact T					
	Date of B	irth			National ID No.	
	Sex				Civil Status	
2.	Qualific	cations				
	I	PhD		Year :		
				University:		
				Subject Area:		
	II MPhil or MSc by research		Year :			
		researen		University:		
				Subject Area:		
	III	MSc		Year :		
				University:		
				Subject Area:		
	IV	BSc		Year:		
				University:		
				Subject Area:		
				General/Special:		

			Class Obtai	ned:			
3.	Researc	ch Experience					
	I	Prior to post graduation	Perio <u>From</u>	d <u>To</u>	Employer	Position held	Area of research
	П	After post graduation by research [MPhil/MSc]	Perio <u>From</u>	d <u>To</u>	<u>Employer</u>	Position held	Area of research
	III	After post graduation by research [PhD]	Perio From	d <u>To</u>	<u>Employer</u>	Position held	Area of research
4.		blications, Patents & Awards (Applicant should provide copies of publication for				ation for	
	evaluat I	Research papers [Foreign/Refereed]					
	II	Research papers [cited]					
	III	Books with ISBN [>50 pages]					
	IV	Research papers [other local/Refereed]					
	V	Extension Materials					
	VI	Research papers [Non refereed]; Bulletins & conference proceedings full papers					
	VII	Research papers [Non refereed]; conference proceedings					

		abstracts				
	VIII	Research Terminal Reports				
	IX	Patents	Commercialized	1		
			Others			
	X	Research Awards	International			
			Local			
	XI	Scientific Committee representations at national level	C	ommittee	<u>Period</u>	
5.		butions to the Inc	dustry			
	I	New recommendations				
	II	Revised recommendations				
	III	Special National-				
		Level Development activities				
6.	Contra	ct Research & P	eer Recognition			
	I	Research grants	Local			
			Foreign			
	II	Visiting lectures	<u>Un</u>	<u>iversity</u>	Period	
		(attach evidence)				
	III	Editor of Journal	Local			
			Foreign			
			Editorial Statuary Board			
	IV	Member Research	Review Team			

	V	Supervision of	PhD	
	•	Students	TIID	
		Students		
			MPhil	
			MSc	
			BSc	
			DSC	
7.	Knowle	dge en Institut	n's	
/.	MIIOWIC	edge on Institut	e S	
	Recom	mendations		
8.	Admini	istrative Experi	ence	
9.	A 41	1 4	•	
9.	Any other relevant competencies			
10.	Why do	you wish to apply f	or this post	
			-	
11.	Whether	you have been cor	victed by the	
	Courts fo	or any offence.		
	If so give	dotaile		
	m so give	uctans		

I certify that the informati	ion given above are true and c	correct to best of my knowledge.
I certify that the informat	ion given above are true and e	offect to best of my knowledge.

Signature of the Applicant	Date:

<sup>\*</sup> Please attach the copies of the certificates and relevant documents.

<sup>\*\*</sup> If space is not sufficient to write the details, submit them as attachment.

## Certification by the Head of the Institute: (Applicable only for the applicants of Government/Semi Government/Corporations and Statutory Board)

I do hereby declare that the	appli	cant, Dr/Mr/Mrs/Miss			
is serving in the post of .		of the			
Institution/Department from	ı	on permanent/temporary/casual basis and he/she can be/cannot be released			
from the service, if he/she will be selected for the post applied.					
		Signature of the Head of the Institute/Department with official stamp			
Date	:				
Name of certifying officer	:				
Post	:				
Address	:				