



**BOSE INSTITUTE
KOLKATA**

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Advt. No.: BI/NON-ACA/05/2025-26 DATED 22.05.2025

Post Applied For:

1.	Name of the Candidate:	
2.	Father's / Spouse Name:	
3.	Date of Birth:	
4.	Gender:	
5.	Category (General / SC / ST / OBC):	
6.	Nationality:	
7.	Mailing Address with Pin Code	
8.	Permanent Address with Pin Code:	
9.	Mobile No.:	
10.	Email Address:	

Educational Qualification:

Sl. No.	Exam Passed	Subject	University / Institute	Year of Passing	Class	Percentage of Marks

Registration Number of the Veterinary Council of India:

Experience:

Sl. No.	Organisation	Post held	Period		Last Pay	Nature of duties
			From	To		

I solemnly declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incomplete/incorrect, my candidature is liable to be rejected by the decision of Bose Institute.

PLACE:

SIGNATURE:

DATE:

FULL NAME:

(Application received without self-attested photocopy of Educational, Experience & Registration certificates shall be rejected.)