SUGARCANE RESEARCH INSTITUTE
APPLICATION FOR THE POST OF
DEPUTY DIRECTOR (RESEARCH & TECHNOLOGY TRANSFER)

1.	**Personal Details**			
	Name in Full			
	Address			
	Date of Birth		National ID No.	
	Sex		Civil Status	
2.	**Qualifications**			
	I	PhD	Year : University : Subject Area:	
	II	MPhil or MSc by research	Year : University : Subject Area:	
	III	MSc	Year : University : Subject Area:	
	IV	BSc	Year : University: Subject Area : General/Special : Class Obtained:	

3.	**Research Experience**					
	I	Prior to post graduation	Period From / To	Employer	Position held	Area of research
	II	After post graduation by research [MPhil/MSc]	Period From / To	Employer	Position held	Area of research
	III	After post graduation by research [PhD]	Period From / To	Employer	Position held	Area of research
4.	**Publications, Patents & Awards (Applicant should provide copies of publication for evaluation)**					
	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		
			Others		
	X	Research Awards	International		
			Local		
	XI	Scientific Committee representations at national level	Committee		Period
5.	**Contributions to the Industry**				
	I	New recommendations			
	II	Revised recommendations			
	III	Special National-Level Development activities			
6.	**Contract Research & Peer Recognition**				
	I	Research grants	Local		
			Foreign		
	II	Visiting lectures (attach evidence)	University		Period
	III	Editor of Journal	Local		
			Foreign		
			Editorial Statuary Board		
	IV	Member Research Review Team			

	V	Supervision of Students	PhD	
			MPhil	
			MSc	
			BSc	
7.	**Knowledge on Institute's Recommendations**			
8.	**Administrative Experience**			
	I	Principal Research Officer or equivalent capacity		
	II	Deputy Director or equivalent capacity		
9.	**Any other relevant competencies**			
10.	**Why do you wish to apply for this post**			
11.	**Whether you have been convicted by the Courts for any offence.**			
	If so give details			

* Please attach the copies of the certificates and relevant documents.

** If space is not sufficient to write the details, submit them as attachment.

I certify that the information given above are true and correct to best of my knowledge.

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Signature of the Applicant Date: ……

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 applicant, Dr/Mr/Mrs/Miss ……... is serving in the post of …… of the ……. Institution/Department from ……. 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 : …….