

By Speed Post



भाकृअनुप - कुक्कुट अनुसंधान निदेशालय  
राजेन्द्रनगर, हैदराबाद 500 030  
ICAR - DIRECTORATE OF POULTRY RESEARCH  
Rajendranagar, Hyderabad 500 030  
Ph : +914024017000/24015651, Fax: +914024017002  
email : pdpoult@nic.in, Website: www.pdonpoultry.org  
An ISO 9001: 2015 Certified Organization



F.No.1-149/2016-Estt./

Dated: 31/10/2018

### MEMORANDUM

On the basis of the result of the Lower Division Clerk (DR- Exam-2016) approved by the Competent Authority of the Agricultural Scientist Recruitment Board (ASRB), New Delhi, the Director, ICAR, Directorate of Poultry Research, Rajendranagar, Hyderabad is pleased to offer the post of Lower Division Clerk (Un-reserved) to Miss Nimma Siva Dharani D/o Sri N. Adi Sankar, Roll No. 30500017 under Un-reserved Quota on the following terms and Conditions as detailed below.

1. The post is purely temporary but, likely to continue and the appointment will be governed by the Rules, Bye Laws and regulations of the ICAR Society.
2. On appointment, the post will carry pay at the minimum of the Level -2 of Pay Matrix of 7<sup>th</sup> CPC i.e. @ Rs.19,900/- (pre-revised Pay Band-1 Rs.5200-20200+G.P.Rs.1,900-00). She will be entitled to draw such allowances which are admissible to other staff of corresponding grade and status under the Indian Council of Agricultural Research Stationed at her working place.
3. Grant of Pay, Leave, Traveling and other allowances are regulated by the Indian Council of Agricultural Research *mutatis mutandis* in accordance with the principles of the fundamental rules and supplementary rules and such other rules and orders as are issued by the Govt. of India from time to time.
4. Her Headquarters for the present will be at ICAR – Directorate of Poultry Research, Rajendranagar, Ranga Reddy District, Hyderabad -500 030, Telangana. But she may be required to serve any where in India.
5. She will be on probation for a period of two years from the date of her joining the post, which may be extended at the discretion of the Competent Authority. Failure to complete the period of probation to the satisfaction of the Competent Authority will render her liable to be discharged from service. During the period of probation, however, the appointing authority may terminate the service of the appointee without giving any notice and without the payment of salary in lieu thereof.
6. Her appointment may be terminated without assigning any reason by giving one month's notice on either side under Rule 5 of the Central Civil Service (Temporary Service) Rules 196, as extended to the Council's employees.
7. Her appointment will be subject to the satisfactory verification of her character and antecedents. If in any case, adverse reports are received, which tender persons unsuitable for appointment, the ICAR-DPR may terminate the services of the person, without assigning any reasons or giving any indication that it is related to the report of the verification of her character and antecedents or informing the person concerned about the source of the information, which shall be treated as confidential.

*[Signature]*

8. Her appointment will be subject to the condition that she is declared medically fit for service by the prescribed medical authority.
9. On appointment, she will be required to take an Oath of allegiance to the Constitution of India and made a solemn affirmation to that effect.
10. In accordance with the orders in force in regard to recruitment to service under the Govt. of India, no person who has entered into or contracted a marriage with any person having a spouse living or who having a spouse living has entered into or contracted marriage with any person, is ineligible for appointment under the Govt. of India, provided, the Govt. may, if they are satisfied that there are special reason for doing so, exempt any person from the operation of this rule. This offer of appointment is, therefore, conditional upon satisfying the requirements mentioned and also furnishing to the Council a declaration to the effect in the prescribed proforma at the time of joining. If, however, she desires to be exempted from the operation of this rule for any special reasons, she should make a representation in this behalf immediately. This offer of appointment shall, in that case, be treated as cancelled and feature communication will be sent to you in due course, if upon a consideration of your representation, it is decided to offer you the appointment.
11. She will be governed by the defined Contribution Pension System (New Pension Scheme) introduced by the Govt. of India F.No.1(7)/(2)/2003/TA/11, dated 7<sup>th</sup> January, 2004 read with O.M. No. 1(7)/(2)/2003/TA/67/74, dated 4<sup>th</sup> February, 2004, which has become effect from 1-1-2004 and amended from time to time.
12. Her appointment under the Council will be considered to be fresh appointment and she will not be entitled to any travelling and/ or conveyance allowance for joining the post.
13. If she is already serving in Central Govt./ State Govt./PSU/ Autonomous Body/ Bank/ Corporation etc. his/her appointment shall be subject to "NO OBJECTION CERTIFICATE", "Vigilance clearance" and relieving by the present employer.
14. If any declaration given or information furnished by her proves to be false or if she found to have will fully suppressed any material information she will be liable for removal from service and such other action as may be deemed necessary.
15. The appointment is provisional and is subject to the Castes/Tribes/others relevant certificates being verified through the proper channel and if the verification reveals that the claim to belong Scheduled Caste and Scheduled Tribes, OBC, Divyang (PWD) as the case may be is false, the service will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of the Indian Penal Code or under any other law for production of false certificates.
16. Her seniority in the post of Lower Division Clerk (Un-reserved) will be governed by the relevant ICAR Administrative Service rules/orders/ staff regulations which may be issued by the ICAR from time to time.
17. Other conditions of the service will be governed by the relevant rules/orders/ Administrative Staff regulations, which may be issued by the Govt. of India/ICAR from time to time.
18. She is required to stay in the quarters in case she is allotted, on payment of license fee etc. as per rule.



- 19 She will be considered junior in the service to those working in the same cadre.
20. In case she already serving under ICAR where her character and antecedents and medical fitness have already been duly done on initial appointment, she will be allowed to join duty strait away provided, that it is duly certified under authority of her present employer for relieving the candidates.
21. **If, the terms and conditions in the above offer are acceptable to her, she should bring with her the following original certificates personally and report for duty to the Director, ICAR-Directorate of Poultry Research, Rajendranagar, Hyderabad within 15 days from the date of receipt of this Memorandum failing which necessary action will be taken for cancellation of this Memorandum/Offer of appointment.**
- (a) Original certificates of educational qualification and other technical qualifications
  - (b) Certificate as proof of date of birth
  - (c) Latest Certificate in the prescribed form to support that the candidate belongs to SC/ST/OBC community from the District Magistrate/Addl. Dist. Magistrate/Collector/Dy. Commissioner/Addl. Dy. Commissioner/Dy. Collector/First Class Magistrate/Sub-Divisional Magistrate/Taluk Magistrate/Executive Magistrate/Asst. Commissioner etc. Divyang (PWD) Certificate (copy enclosed). The appointment of candidate claiming to be belonging SC/ST/OBC, would be provisional and subject to the caste/tribe/OBC certificate verification.
  - (d) The enclosed following Proformae may be submitted to this Office after duly filled in all respects.
    - (1) Acceptance form (2) Attestation form (3) Certificate of physical fitness (4) Certificate of Character (5) Form of Oath of Allegiance (6) Home -Town Declaration (7) Declaration of Marital Status (8) Returns of Assets and Liabilities on first appointment (9) Latest OBC Certificate.
- Any clarification on the above matter may be contacted to this Institute telephone No. 040-24015651.

  
(AVGK.MURTHY)  
ADMIN.OFFICER

Encl: as above.

To  
Miss Nimma Siva Dharani,  
D/o Sri N. Adi Sankar,  
H.No.28-5-4A, New Revenue Colony,  
Near R.T.O. Office Road,  
**ANANTAPUR, Andhra Pradesh.**  
Phone: 7013346849.  
e-mail: Dharani96sankar@gmail.com

Copy to:

1. I/c ARIS Cell for information and necessary action.
2. AFAO, ICAR-DPR, Hyderabad.
3. DDO, ICAR-DPR, Hyderabad.
4. Personal file of the concerned.



Dated: \_\_\_\_\_

To  
The Director,  
ICAR-Directorate of Poultry Research,  
Rajendranagar,  
Hyderabad – 500 030.

Sub: Acceptance of Offer of Appointment for the temporary post of Lower Division Clerk under Un-Reserved/OBC category at ICAR-DPR, Hyderabad – reg.

Respected Sir,

I am thankful to the Hon'ble Director, ICAR-DPR, Hyderabad for offering the temporary post of Lower Division Clerk under Un-Reserved/OBC category at your Directorate vide Memorandum No. 1-149/2016-Estt., dated \_\_\_\_\_.

Further, I hereby convey my acceptance for the terms & conditions mentioned in the above said Memorandum No. 1-149/2016-Estt., dated \_\_\_\_\_ and willing to join the post of Lower Division Clerk under Un-Reserved/OBC category at ICAR-DPR, Hyderabad.

I am very much happy to submit my joining report to the post of Lower Division Clerk under Un-Reserved/OBC category at ICAR-DPR, Hyderabad on the forenoon/afternoon of \_\_\_\_\_.

Contd...2/-

The following documents/forms duly filled in all respects are enclosed herewith for kind consideration:

- (1) Attestation form
- (2) Certificate of physical fitness
- (3) Certificate of Character
- (4) Latest OBC Certificate
- (5) Form of Oath of Allegiance
- (6) Home –Town Declaration
- (7) Declaration of Marital Status
- (8) Returns of Assets and Liabilities on first appointment.
- (9) Date of Birth Certificate
- (10) Intermediate Certificate
- (11) Any other qualifications (Academic/Technical)
- (12) Bank Account
- (13) Aadhaar Card
- (14) PAN card
- (15) Family particulars
- (16) Latest passport size photos – 02 Nos.

Yours faithfully,

(\_\_\_\_\_)

Roll No. \_\_\_\_\_

e-mail: \_\_\_\_\_

Mobile No. \_\_\_\_\_

Postal address with pin code: \_\_\_\_\_

ATTESTATION FORM

"WARNING"

1. The furnishing of false information or suppression of any factual information in the attestation form would be disqualification and is likely to render the candidate unfit for employment under the Government.
2. If detained, convicted, debarred, etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the U.P.S.C. or the authorities to whom the attestation form has been sent earlier, as the case may be, failing which it will be deemed to be a suppression of factual information.
3. If the fact that false information has been furnished or that there has been suppression of any factual information in the attestation form comes to notice at any time during the service of a person, his services would be liable to be terminated.

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1. Name in full (in block letters) with aliases, if any (please indicate if/you have dropped in any stage any part of your name or surname)

SURNAME

NAME

---

2. Present address in full (village, Thana & Dist. or house No. lane/street/road and Town.

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3. a) Home address in full (Village, Thana & Dist. or House No. lane/Street/road and Town and name of District headquarters.

3. b) If originally resident of Pakistan, the address in that country and the date of migration to Indian Union.

4. Particulars of places (with periods of residences) where you have resided for more than one year at a time during the preceeding five years. In case of stay abroad (including Pakistan) particulars of all places where you have resided for more than one year after attaining the age of 21 years should be given.

From	To	Residential address in full (village/Thana and Dist. or House No. lane/street/road and Town.	Name of the Dist. Headquarters of the place mentioned in the preceeding col.

5. Name Nationality (by birth and/or by domicile) Place of birth Occupation if employed give designation and official address Present Postal man- address ent (if dead Home give last Add- address) ress

i) Father  
(Name in full with alias if any)

ii) Mother

iii) Wife/Husband

iv) Brother(s)

v) Sister (s)

6. Nationality



- 7 a) Date of birth (a)  
 b) Present age (b)  
 c) Age at matriculation (c)

- 8 a) Place of birth (a)  
 District & State in  
 which situated  
 b) District and State (b)  
 to which you belong  
 c) District and State (c)  
 to which your father  
 originally belongs

9. a) Religion :  
 b) Are you a member of a :  
 Scheduled Caste/Scheduled  
 Tribe? Answer 'Yes' or  
 'No!' and if the answer is  
 'yes' state the name thereof

10. Educational qualifications showing places of education with  
 years in Schools and Colleges since 15th year of age.

Name of School/College with full address	Date of entering	Date of leaving	Examination passed
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11. (A) Are you holding or have any time held an appointment  
 under the Central or State Government or a Semi-Govt.  
 or a Quasi-Govt. or an autonomous body, or a Public  
 undertaking or private firm or institution? If so,  
 give full particulars with dates of employment, Up-to-date.

From	To	Designation, emoluments and nature of employment	Full name & address of employer	Reasons for leaving pre- vious service
------	----	---	---------------------------------------	--

11(B) If the previous employment was under the Government of India, a State Govt./and undertaking owned or controlled by the Govt. of India or a State Govt./ and autonomous body/ University/Local body. If you had left service on giving a months notice under rule 5 of the Central Civil service (Temporary service) Rules 1965, or any similar corresponding rules, were any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matters at the time you gave notice of termination of service, or at a subsequent date, before your services actually terminated.

- 
12. a) Have you ever been arrested? Yes/No
- b) Have you ever been prosecuted? Yes/No
- c) Have you ever been kept under detention? Yes/No
- d) Have you ever been bound down? Yes/No
- e) Have you ever been fined by a Court of Law? Yes/No
- f) Have you ever been convicted by a Court of Law for any offence? Yes/No
- g) Have you ever been debarred from any examination or restricted by any university or any other educational authorities/institutions? Yes/No
- h) Have you ever been debarred/disqualified by any public service commission from appearing at its examination/selection? Yes/No
- i) Is any case pending against you in any Court of Law at the time of filling up this Attestation Form? Yes/No
- j) Is any case pending against you in any University/or any other education authority/institution at the time of filling up this Attestation Form? Yes/No

- 11) If the answer to any of the above mentioned questions is 'Yes', give full particulars of the case/arrest/detention/fine/conviction/sentence/punishment, etc. and/or the nature of the case pending in the Court/University/Educational Institute, etc. at the time of filling up this form.

NOTE : Please also see the 'warning' at the top of this Attestation Form.

Specific answers to each of the question should be given by striking out 'Yes' or 'No' as the case may be.

13. Name of two responsible persons 1. \_\_\_\_\_ of your locality or two references to whom you are known.

2. \_\_\_\_\_

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment under Government.

SIGNATURE OF CANDIDATE

DATE ...

PLACE ....



IDENTITY CERTIFICATE

(Certificate to be signed by any one of the following)

- i) Gazetted Officers of Central or State Government
- ii) Member of Parliament or State Legislature belonging to the constituency where the candidate or his parent/guardian is ordinarily resident.
- iii) Sub-Divisional Magistrates/Officers.
- iv) Tahsildars or Naib/Deputy Tahsildars authorised to exercise magisterial powers.
- v) Principal/Head Master of the recognised School/College/Institution where the candidate studied last.
- vi) Block Development Officer.
- vii) Post Masters.
- viii) Panchayat Inspectors.

Certified that I have known Sri/Smt, Kum. ....  
.....Son/Daughter of Sri....  
for the last .... years ..... months, and that to the  
best of my knowledge and belief the particulars furnished by him/  
her are correct.

Place:

Date..

Signature. \_\_\_\_\_

Designation.

or status, ☒

and address.

TO BE FILLED BY THE OFFICE

- i) Name, Designation and full address of the appointing authority.
- ii) Post for which the candidate is being considered.



# FORM TO BE FILLED BY GOVERNMENT EMPLOYEES ON FIRST APPOINTMENT

1. Close relations who are  
nationals or domiciled  
in other countries

Name

Nationality

Present Address

Place of birth

Occupation

- i) Father
- ii) Mother
- iii) Wife/Husband
- iv) Son(s)
- v) daughter(s)
- vi) Brother(s)
- vii) Sister(s)

2. Close relations residents  
in India, who are non Indian  
Origin

- i) Father
- ii) Mother
- iii) Wife/Husband
- iv) Sons (s)
- v) Daughter (s)
- vi) Brother (s)
- vii) Sister (s)

\*If in Public Service, give full particulars regarding designation of the post held,  
name of Department/Office etc., where employed and the date of such employment.

I certify that the foregoing information is correct and complete to the best of my  
knowledge and belief.

Place .

Signature

Date ..

Designation .....

Note: 1. Suppression of information in this form will be considered a major Department Offence,  
for which the punishment may extend to the dismissal from service.  
2. Subsequent changes if any, in the above data should be reported to the Head of the  
Office/Department at the end of such year.





## D E C L A R A T I O N

I, Sri/Smt/Kum. . . . .

declare as under:

- \*i) That I am unmarried/a widower/a widow
- \*ii) That I am married and have only one wife living.
- \*iii) That I am married and have more than one wife living.  
Application for grant of exemption is enclosed.
- \*iv) That I am married and that during the life time of my spouse have contracted another marriage. Application for grant of exemption is enclosed.
- \*v) That I am married and my husband has no other living wife, to the best of my knowledge.
- \*vi) That I have contracted a marriage with a person who have already one wife or more living. Application for grant of exemption is enclosed.

2. I, solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date..

Signature...

Note: \* Please delete clauses not applicable.



Page 1 of 1  
Date: 10/10/2010  
Time: 10:10:10

Page 1 of 1  
Date: 10/10/2010  
Time: 10:10:10

Ministry/Department/Office. . . . .

No. . . . . Place.....Dated.....

DISCHARGE CERTIFICATE

Shri ..... has/had working .....  
..... in the Ministry/Department Office of  
..... from .....  
to ..... He was drawing Rs...../-  
as pay with/without allowances and/this service have been or are  
likely to be terminated with effect from .....  
on account of reduction in Establishment. His work and conduct  
was satisfactory.

2. He was employed through the Union Public Service Commission  
through the Employment Exchange .....  
from the open market after obtaining a non-availability certificate  
from the Employment Exchange with the prior approval of the Ministry  
of Home Affairs/directed with a reference to the Employment Exchange  
or the Ministry of Home Affairs.

SIGNATURE  
(Designation of Officer  
with office seal)

-----  
Statement showing the details of family members in respect  
of Sri/Smt/Kum . . . . . as required under the  
family pension scheme.  
-----

Sl. No.	Name	Relation- ship	Date of Birth	Remarks
1.				
2.				
3.				
4.				

I hereby declare that the information given above is  
correct and also hereby promise to communicate the additions and  
alternations as and when happen.

Date .....

Signature .....



CERTIFICATE OF CHARACTER

(For Calss III Service)

Certified that I have known Sri/Smt/Kum .....  
Son/Daughter of Sri..... for the last .....  
years ..... months and that to the best of my knowledge  
and belief he/she bears reputable character and has no antecedents  
which render him/her unsuitable for Government employment.

2. Sri/Smt/Kum,,,,,,,,,,,,,,,,,,,,,,,,,,,,, is not related to  
me.

Date:

Signature.....

Place:

Designation .....

\*(To be attested by stipendiary 1st Class Executive  
Magistrate, District Magistrate or Sub-divisional Magistrate)

Attested

Signature.....

Designation ,.....

(Attesting authority)

NOTE: This should be done after the candiate has been finally  
selected for appointment.



A. CANDIDATE'S STATEMENT AND DECLARATION

The candidate must make the statement required below prior to his Medical Examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the Note below :-

1. State your name in full :  
(in block letters)
2. State your age and birth place
3. (a) Have you ever had small pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis?

OR

- (b) Any other disease or accident requiring confinement to bed and medical or surgical treatment?
4. When were you last vaccinated?
5. Have you or any of your near relations been afflicted with consumption, scrofula, gout, asthma, fits, epilepsy or insanity?
6. Have you suffered from any form of nervousness due to over-work or any other cause?
7. Furnish the following particulars concerning your family:-

Father's age, if living, and state of health	Father's age at death and cause of death	No. of brother living, their ages and state of health	No. of brothers dead, their ages at, and cause of death
Mother's age if living, and state of health	Mother's age at death and cause of death	No. of sisters living, their ages and state of health	No. of sisters dead, their ages at, and cause of death

I declare all the above answers to be, to the best of my belief, true and correct.

CANDIDATE'S SIGNATURE

SIGNED IN MY PRESENCE

SIGNATURE OF THE MEDICAL OFFICER -

NOTE :- The candidate will be held responsible for the accuracy of the above statement. By wilfully suppressing any information he will incur the risk of losing the appointment and, if appointed, of forfeiting all claim to Superannuation Allowance or Gratuity.



## HEALTH AND AGE CERTIFICATE PHYSICAL FITNESS CERTIFICATE

I do hereby certify that I have examined

Sri /Smt./ Kum. \_\_\_\_\_

S/o D/o Sri \_\_\_\_\_

Resident of \_\_\_\_\_

A candidate of Admission/Employment/Training in the \_\_\_\_\_

\_\_\_\_\_Department and cannot discover that he/she has  
already dies and constitutionally, bodily infirmity I do not consider this is a  
disqualification for the employment/Training/ Admission in the

\_\_\_\_\_Department.

His/Her age is according to his/her own statement is

\_\_\_\_\_Years and by appearance \_\_\_\_\_years, and his /her height is

\_\_\_\_\_

Weight is \_\_\_\_\_

Chest is \_\_\_\_\_

- 1) Had an attack of Small pox. }
- 2) Had marks of successful vaccination.}
- 3) He/She will be eligible for employment/}  
Admission/Training and revaccination.

### IDENTIFICATION MARKS:

1.

2.

SIGNATURE OF MEDICAL OFFICER





**कुक्कुट अनुसंधान निदेशालय**  
**ICAR-DIRECTORATE OF POULTRY RESEARCH**  
**(Indian Council of Agricultural Research)**  
**Rajendranagar, Hyderabad 500 030**  
Ph: 040-24017000/24015651, Fax : 040-24017002 email : [pdpoult@ap.nic.in](mailto:pdpoult@ap.nic.in), website : [www.pdonpoultry.org](http://www.pdonpoultry.org)  
**(ISO 9001:2008 Certified)**  
**(Recipient of Sardar Patel Best Institute Award 2013)**



**OATH OF ALLEGIANCE**

I, \_\_\_\_\_ S/o \_\_\_\_\_, do swear  
that I will be faithful and bear true allegiance to India and to the Constitution of India  
as by law established, and that I will carry out duties of my office loyally, honestly and  
with impartiality.

(So help me God)

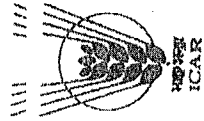
Signature of the Candidate:

Name of the Candidate:

SWORN BEFORE ME

DIRECTOR





पुष्पकट अनुसंधान निदेशालय  
ICAR- DIRECTORATE OF POULTRY RESEARCH  
Rajendranagar, Hyderabad 500 030  
Ph:040-24017000/24015651, Fax : 040-24017002 email : pdpoultry@an.nic.in, website : www.pdpoultry.org  
(ISO 9001:2008 Certified)  
(Recipient of Sardar Patel Best Institute Award 2013)



**ANNUAL IMMOVABLE PROPERTY RETURN**

Statement of immovable property for the year 2017 (as on 31-01-2018)

1. Name of Officer (in full and service to which the officer belongs) : \_\_\_\_\_
2. Present post held : \_\_\_\_\_
3. Present Pay : \_\_\_\_\_

Name of District, Sub-Division, Taluk and village in which property is situated	Name and details of Property		Present value	If not in own name state in whose name held and his/her relationship to the Government Servant	How acquired whether by purchases, lease**, mortgage, inheritance, gift or otherwise, with date of acquisition and name with details of person/ persons from whom acquired	Annual income from the property	Remarks
	Housing and other buildings	Lands					

Signature: \_\_\_\_\_  
Dated: \_\_\_\_\_

- Inapplicable clause to be struck out.
- In case where it is not possible to assess the value accurately the approximate value in relation to present conditions may be indicated.
- Includes short-term lease also.
- The working "NO Change or No addition or as in previous year" may be avoided and all details filled-up.
- Note> The declaration form is required to be filled in and submitted by member of Class I and Class II (Group-A and Group-B) services under Rule 15(3) of the Central Civil Services(Conduct Rules)1955(now Rule -18(1) of the CCS (Conduct)Rules 1964). On the first appointment to the service and thereafter at the interval of every twelve months, giving particulars of all immovable property owned, acquired or inherited by him or held by him on lease or mortgage, either in his own name or in the name of any member of his family or in the name of any other person.



APPENDIX – V (b)  
FORM – 1 (A)  
UNDERTAKING

In accordance with the employment that I hold under the financial and other assistance and facilities received or to be received by me from the Indian Council of Agricultural Research (hereinafter referred to as the Council). I S/o Sri residing at \_\_\_\_\_ as one of the terms on which I have received such employment or have received or am about to receive such financial and other assistance and facilities, undertake that:

1. I shall from time to time disclose fully to the Council or as the Council may direct, the progress of any investigations undertaken by me while in the employment of the Council or in respect of such assistance as aforesaid (hereinafter referred to as the investigation) and if any time during the course of such assistance or within a “ period of 10 years after the termination of such employment or of receipt of such assistance as aforesaid” I shall make any invention arising out of or in connection with the said investigation, I shall hold the same in trust on behalf of the Council and forthwith disclose to the said Council, or as the Council may direct, a full and complete description of the nature of the said invention and the mode of performing the same.

2. I shall not publish the results of the said investigation without the prior approval of the Council.

3. The said invention and all improvements thereon discovered or invented by me during the course of receipt of such assistance as aforesaid shall, subject to such reservations ( if any) in respect of the said invention or the proceeds thereof for any benefits as the Council may in its discretion permit, be the sole and the absolute property of the Council. And I shall, if whenever required by the Council of expense of the Council, join the Council or as the Council may direct in applying for letters/Patents in India and other countries for the said invention or any such improvements, thereon and shall on request by and at the cost of the Council execute and do all such instruments and things necessary to vest the said invention and improvements and any letter patents that may be obtained in respect thereof in the Council or any person appointed by the Council in that behalf.

1. Date of appointment/Joining :
2. Post and Category :
3. Date of Birth :

Dated the

Signature of the Candidate  
**((NAME IN BLOCK LETTERS))**

Counter Signature

Signature of the Head of the Institute  
**DIRECTOR**  
**ICAR- DIRECTOARATE OF POULTRY RESEARCH**  
**(Indian Council of Agril.Research)**  
**RAJENDRANAGAR: HYDERABAD-30**







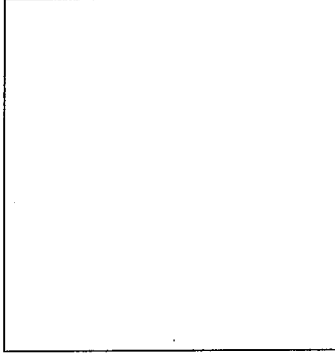
भाकृअनुप – वुक्कुट अनुसंधान निदेशालय  
**ICAR- DIRECTORATE OF POULTRY RESEARCH**

Rajendranagar, Hyderabad 500 030  
Ph:040-24017000/24015651, Fax : 040-24017002 email : pdpoultry@ap.nic.in, website : www.pdonpoultry.org  
(ISO 9001:2008 Certified)

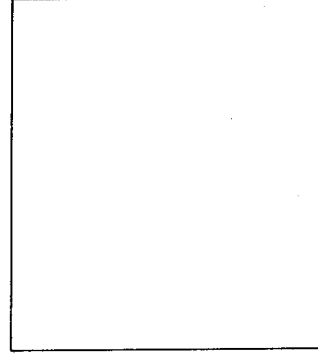
(Recipient of Sardar Patel Best Institute Award 2013)



Recent Passport Photo of Employee



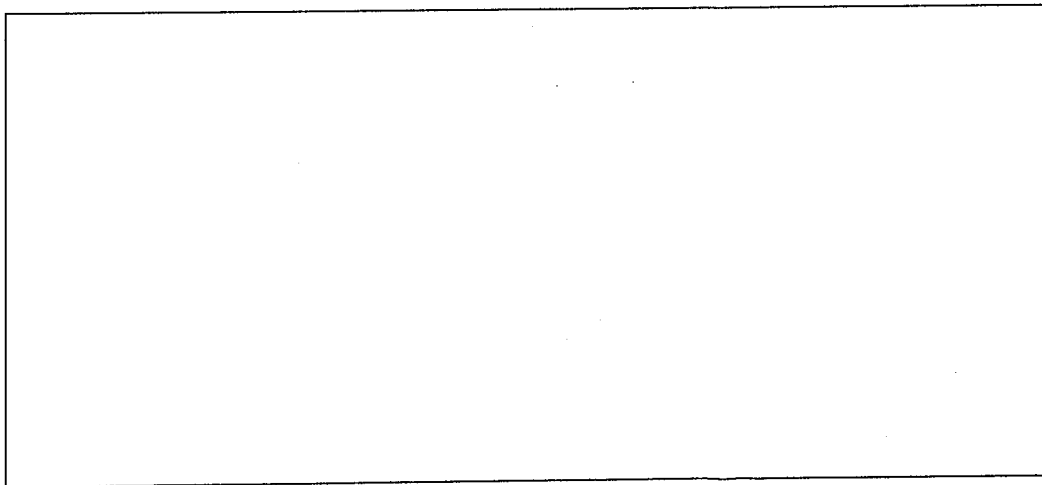
Recent Passport Photo of Spouse



Details of Occupation of Employee

Details of Occupation of Spouse

Recent Photograph of Family of Employee whose names are included in the Dependent's list



Signature of the Employee with date

Signature of the Spouse with date

