



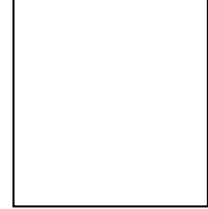
**INDIAN ASSOCIATION FOR THE CULTIVATION OF SCIENCE**

2A & 2B Raja S C Mullick Road, Jadavpur, Kolkata-700 032

**APPLICATION FORM FOR ISSUING IDENTITY CARD**

Serial No.: \_\_\_\_\_ To

The Registrar, I.A.C.S.



Dear Sir/ Madam,

I am a regular / temporary Faculty/ Staff / Junior Research Scholar/Senior Research Scholar/ Research Associate of IACS and request you to issue an Identity Card. My personal information is furnished below in the given pro-forma. I shall be grateful if you kindly issue Identity Card in my favour.

NAME OF CANDIDATE \_\_\_\_\_ GENDER : MALE/  
FEMALE/TRANSGENDER

DESIGNATION \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

FELLOWSHIP/Employee ID/P.P.O No \_\_\_\_\_ NAME OF SUPERVISOR \_\_\_\_\_

DATE OF JOINING \_\_\_\_\_ BLOOD GROUP \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_  
\_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CONTACT NO. \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ TYPE OF ID : FRESH/RE-ISSUE/TEMPORARY

DATED \_\_\_\_\_ SIGNATURE OF APPLICANT:  
( Use Black Gel Pen )



**FORWARDED BY H.O.D / SUPERVISOR WITH DATE :**  
\_\_\_\_\_

INSTITUTE ID NO.: \_\_\_\_\_

**CHECKED & VERIFIED BY CONCERNED OFFICER**

SIGNATURE WITH SEAL :

**FOR OFFICE USE ONLY**

Prepared By \_\_\_\_\_

**Signature of Issuing officer with Seal**