

Annexure I

**Application for Consultant (Part time/Visiting) at C-DAC,
Thiruvananthapuram.**

Photo

I. NAME :

II. ADDRESS :

III. AGE (as on 01/01/2026):

IV. CONTACT DETAILS :

MOBILE :

E MAIL :

V. DETAILS OF QUALIFICATION (Please attach self-attested copies of the certificates)

Sl No	Qualification	Year of pass	College & University	% of Marks (Also mention Rank/Class)

VI. DETAILS OF EXPERIENCE (Please attach documents to prove the experience)

Sl.No	Name and Address of the Organization/Firm	From (dd/mm/yy)	To (dd/mm/yy)	Brief description of relevant experience

V. References *(Please provide the names and contact numbers of one/two persons who can be contacted for reference)*

1)

2)

Name and signature of the applicant

Place:
Date