

CCSEA NOMINEE APPLICATION FORM

PHOTO

1. Name of the Applicant -
i. In English :
ii. हिंदी में :
2. Category of Application : Nominee / Socially Aware Nominee (Please Tick)
3. Date of Birth (DD/MM/YYYY) :/...../..... Age [Year(s)/Month(s)]:
4. Organization :
5. Current Designation :
6. Gender :
7. Address for Communication :
8. Current state of working/
residence :
9. Telephone :
10. Fax :
11. Mobile :
12. E-Mail :
13. Academic Qualifications: (*Most current qualification first*)

Degree / Certificate	Subject	Year	Institution, Country

14. Professional Experience:

Duration [Year(s)/Month(s)/Day(s)]	Designation	Institution / Company, Country	Government/ Private	Nature of Employment (Permanent/ Temporary)
Total:				

Note: In case of Private employees, please mention the joining date and term of contract.

15. Experience Certificate of Animal Handling and research: *As per the prescribed proforma.*
(Experience should be calculated after completing the minimum educational qualification for the Nominee and documentary evidence should be enclosed for the same)

16. Any other certificate/ experience in animal welfare:

17. Any family member already working as Nominee of CCSEA: Yes/ No
(If yes, please mention the name and relation):

18. No Objection Certificate (Yes / No):
(In the prescribed proforma)

19. Two references (Name and address):

Declaration:

1. I am fully aware of my duties and responsibilities as CCSEA nominee representing the Institutional Animal Ethics Committees (IAEC's)
2. I will carry out my responsibilities in accordance with the rules and regulations of CCSEA and as per the instructions received from CCSEA.
3. I will not use the name of CCSEA on personal letter heads or other communications.
4. I will not misuse the name and purpose of CCSEA for any assistance or gain.
5. I will not disclose any confidential information of the institution / CCSEA.
6. I am aware that my nomination can be cancelled by CCSEA, without assigning any reason.

Date:

Signature of Applicant

The filled in application Form alongwith above information / details / supporting documents (Detailed Resume, Certificate of education qualification, Certificate of Animal Welfare experience, Photo ID proof and Date of Birth Proof) should be sent to :-

**The Member Secretary,
CCSEA, Department of Animal Husbandry and Dairying (DAHD),
Ministry of Fisheries, Animal Husbandry and Dairying,
Delhi Milk Scheme Complex, Near State Bank of India,
Shadipur, Delhi - 110008.
E-mail: cpcsea-mef@gov.in**

Note:

- i. **The application forms complete in all respect shall only be entertained in CCSEA and the incomplete applications shall be rejected without entering into any communication with the applicant.**
- ii. **This form should be signed with ink. Scanned signature and date shall not be accepted.**

Proforma for Experience Certificate of Animal Handling and Research

To,

Dr. S. K. Dutta
 Joint Commissioner (Animal Welfare) &
 Member Secretary (CCSEA),
 Department of Animal Husbandry and Dairying,
 Ministry of Fisheries, Animal Husbandry and Dairying, New Delhi.

This is to certify that Dr./Mr./Ms./Miss.....S/o/ D/o/ W/o is an employee in our Institute / Organization viz. (Name of the Institute / Organization) located at and duties of animal handling and research performed by him/ her during the period(s) are as under:

Name of post held	From dd/mm/yy	To dd/mm/yy	Total period dd/mm/yy	Nature of Appointment- Permanent, Regular, Temporary, Part-time, Contract, etc.	Duties Performed	Small or Large Animals handled (Mention species)	Institution / Company, Country

2. It is certified that above facts and figures are true and based on records available in our Department/ Organization.

Name:Signature:..... Seal with date.....
 (Head of Institute/ Head of Department/ Placement Officer/ Head of Organization)

Proforma for No Objection Certificate

Date:

This is to certify that Dr./Mr./Ms./Miss _____
is an employee in our Institute / Organization viz. (Name of the Institute /Organization)
_____ located at _____

He/ She wishes to apply for Nominee of CCSEA. The Institute / Organization has no objection for permitting him/ her as Nominee of CCSEA in addition to his/her assigned duties.

Signature: _____ Seal with date _____

Name: _____

(Head of Institute/ Head of Department/ Placement Officer/ Head of Organization)

Name of the Institute / Organization: _____