



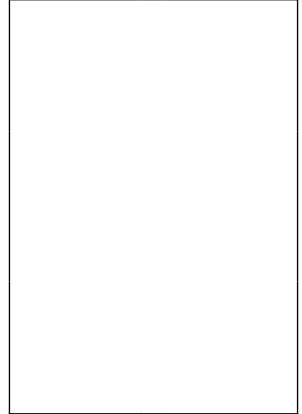
National Centre for Polar & Ocean Research

(Ministry of Earth Sciences, Government of India)
Headland Sada, Vasco-da-Gama, Goa 403 804

AL-1208 Registration Form

Antarctic Logistics Division

Participation in Indian Scientific Expedition to Antarctica



1. Personal Details

Title	_____	Nationality	_____
Last Name	_____	Date of Birth	_____
First Name	_____	Sex	_____
Middle Name	_____	Marital Status	_____

2. Organizational Details

Designation	_____	Phone-1	Country code	Place code	Phone number
Division/ Unit	_____	Phone-2	Country code	Place code	Phone number
Organization	_____	Fax-1	Country code	Place code	Fax number
Address	_____	Fax-2	Country code	Place code	Fax number
City	_____	Mobile-1	Country code	Phone number	
State	_____	Mobile-2	Country code	Phone number	
Postal Code	_____	Email-1	_____		
Country	_____	Email-2	_____		

3. For Armed Forces Personnel

Number	_____
Rank	_____
Branch/ Trade	_____
Unit/ Ship	_____
Command Formation Headquarter	_____

4. PAY Details

Pay Level	7CPC
Total Pay in 7CPC	: Rs. _____
Pay as on July, 2021	: Rs. _____
Pay as on July, 2022	: Rs. _____

5. Participation Choice

Expedition	_____	Area of Operation	_____
Period	_____	Work Sphere	_____

Description of Project and Logistic requirement

6. Earlier Participation(s)

Whether participated in any of the earlier Antarctic Expeditions? If 'Yes' give details of maximum two expeditions _____

Last Expedition	_____	Period	_____
Last but one Expedition	_____	Period	_____

7. Residential Address

(a) Primary Address for correspondence

Address to (Name) _____

Flat/plot/block no. _____

Building/locality name _____

Home City _____

Home State _____

Country _____ Postal Code _____

Phone-1(Home)

Country code	Place code	Phone number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax-1(Home)

Country code	Place code	Fax number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile-1(Home)

Country code	Phone number
<input type="text"/>	<input type="text"/>

Email-1 _____

(b) Alternate Address for correspondence (Family)

Address to (Name) _____

Flat/plot/block no. _____

Building/locality name _____

Home City _____

Home State _____

Country _____ Postal Code _____

Phone-2(Home)

Country code	Place code	Phone number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax-2(Home)

Country code	Place code	Fax number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile-1(Family)

Country code	Phone number
<input type="text"/>	<input type="text"/>

Email-2 (Family) _____

8. Physical / Health Details

Chronic Ailment (if any) _____ Bloodgroup

Allergic to (if any) _____ Height (cm)

Weight(Kg)

Shoe size(UK)

9. Family Details

Mother's Name			Dependents		
Father's Name			Name	Relationship	Date of birth
Name of Spouse			1		
			2		
			3		
Nominee for Insurance			4		
Name	Relationship	Date of birth	5		

10. BANK & PAN DETAILS

Bank Name	
Account no.	<input type="text"/>
IFSC code	<input type="text"/>
Branch Name	
Payable at	
PAN CARD Number	<input type="text"/>
Name(as depicted on PANCARD)	

11. Passport Details

Do you have Official Passport? : Yes No

Do you have Personal Passport? : Yes No

If YES: _____

Official Passport No. _____

Date of Issue _____

Place of Issue _____

Date of Expiry _____

Personal Passport No. _____

Date of Issue _____

Place of Issue _____

Date of Expiry _____

(If you do not have an official passport or your passport is due to expire within 6 months, fill up the form provided in the link: <http://passportindia.gov.in/AppOnlineProject/Resources/DiplomaticFormV2.0.pdf.zip>)

Aadhar Card No.

Signature