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| Affix passport size photograph |

**APPLICATION FORM**

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| 1. | Advertisement No. | | | | | | | | |  | | | | | | | |
| 2. | Post for which applied  Code:  Name: | | | | | | | | |  | | | | | | | |
| 3. | Name in full (in block letters) | | | | | | | | |  | | | | | | | |
| 4. | Father’s/Husband’s Name | | | | | | | | |  | | | | | | | |
| 5. | Date of Birth | | | | | | | | | Date | | Month | | | | | Year |
| 6. | Nationality | | | | | | | | |  | | | | | | | |
| 7. | Gender | | | | | | | | |  | | | | | | | |
| 8. | Whether belongs to SC/ST/OBC/PH/General (Strike out whichever is not applicable) | | | | | | | | |  | | | | | | | |
| 9. | Whether documentary proof from appropriate authority in support of your claim being SC/ST/OBC is enclosed (please tick) | | | | | | | | | Yes | | | | No | | | |
| 10. | Address for correspondence (in block letters with Pin code, e-mail ID and Telephone no.) | | | | | | | | |  | | | | | | | |
| 11. | Permanent address (in block letters) | | | | | | | | |  | | | | | | | |
| 12. | Educational Qualification (in chronological order from 10th Standard onwards) | | | | | | | | | | | | | | | | |
| Sl. No. | Courses Passed | | | University/Institution/  Board | | | | Year of Passing | | | Subject taken | | | | Result with Division/Class | |
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| 13. | Professional Training: | | | | | | | | | | | | | | | | |
| Organisation | | | Period | | | | | | | | | Details of Training | | | | |
|  | | | From | | | | To | | | | |  | | | | |
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| 14. | Employment records (in chronological order, starting with the first job) | | | | | | | | | | | | | | | | |
| Name and address of employer/ institution | | Period | | | | | | | | Designation of post held and scale of pay | | | | Nature of work and level of responsibilities | | |
|  | | From | | | To | | | | |  | | | |  | | |
| 15. | i) Permanent/Temporary/Ad-hoc  ii) Scale of Pay and Basic Pay (Revised/Pre-revised)  iii) other allowances  iv) Total Salary (ii+iii) | | | | | | | | | |  | | | | | | |
| 16. | Details of research work/experience | | | | | |  | | | | | | | | | | |
| 17. | Specialization (with reference to experience desired for the post) | | | | | |  | | | | | | | | | | |
| 18. | Give the names of two reference (they must not be related to you) who are in a position to testify from their personal knowledge as to your fitness for the proposed engagement. They must be persons under whom you have worked or studied. | | | | | | (i) Name with full address:  (ii) Name with full address: | | | | | | | | | | |
| 19. | Any other information you may wish to add [Like list of publications, membership of learned societies, awards and recognition, etc. (in brief)] | | | | | |  | | | | | | | | | | |
| 20. | Details of Enclosures | | | | | |  | | | | | | | | | | |

**21. Declaration**

I certify that the above information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If at any time I am found to have concealed/distorted any material/information, my engagement shall be liable to be summarily terminated without notice/compensation.

Place:

Date:

(Signature of Candidate)