



**Department of Education in Science and Mathematics**  
**Application Form**

**Post Applied For: Semi Professional Assistant**

**Programme Code Applied For: - 6.17**

Full Name (In capital letters)	:	
Father's Name (In capital letters)	:	
Date of Birth (DD/MM/YYYY)	:	
Address for communication	:	
Mobile Number	:	
E-Mail ID	:	
Whether belongs to SC/ST/OBC/PH	:	

**Educational Qualifications:**

S. No.	Examinations	Name of the Boards/University	% of Marks	Subjects	Year of Passing

**Knowledge of Library Software:**

S. No.	Name of the Software	Name of the Institution	% of Marks /Grade	Specialization	Duration of the course

**Job/Work Experience:**

S. No.	Post Held	Period/Duration	Key Responsibilities

Please mention the specific information, (if any) relevant to the post and covered above.

Place:

Date:

**Signature of the Candidate**