ANNEXURE

POST CODE:		
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APPLICATION FORM

(TO BE FILLED IN BLOCK LETTERS ONLY)	
Post Applied:	Affix Recent Passport Size
Advt. No.:	Photograph
1. Name in full (Shri/Smt/Kum):	-
2. a) Father's name:b) Mother's name	
3. a) Date of Birth:19	
b) Age as on closing date mentioned in Advt.:YearsMonthsDay	s
4. a) Sex (Male/Female): b) Marital Status :	
5. Nationality:	
6. Reservation Category (SC/ ST):6 (a) Religion:6 (attach certificates if applicable)	
7. Whether presently working in Government/Semi-Government/Public Sector Undertaking/Autonomous/Corporate Bodies?	
8. Address for correspondence (with Pin Code)	
(Tele No., Mob. No., Fax & e-mail, if any)	
9. Permanent Address (with Pin Code)	
(Tele No., Mob. No., Fax & e-mail, if any)	

10. E	ducational Qualifications:					
Sl.No	o Exam passed Board	Date of joining	Date of Passing	Subject i which deg is awardd	ree of marks	Division
Educ	chronological order from X Standard cation career, if any.	(SSLC/HS/HS	 C) onwards, #	Specify the g	ap with reasons in	
11.	Professional Training:					
	Organisation	From	Period	Го	Details of Training	
12. E	Employment Record* (Attach separat	e sheet	in following	format, if nece	essary):-	
add em	me & Period of lress of service ployer/ From To gn/Institution	Designation of the post held	Scale of pay of each post	Detailed description of work	Reason for leaving	
* Sp	ecify the gap, if any					

- 13. Present Basic pay: Total Emoluments : (with break-up ofbasic,DP,DA,HRA,CCA,TA etc)
- 14. Whether the present post is held on regular or ad-hoc basis:
- 15. Are you under any contractual obligations to serve Central/State Govt/Any other Public Sector Undertaking or Autonomous body and if so, give details : (attach NOC if applicable)

Sr No.	Particulars (eg. Date of Advt, Adv		f Posts & Date ne Inter-		Result
Name	of the Relative	Relationship	Lab/Estt in wh	nich employed	Post Held
8 G	ive two referees name &	Address and contact I	Phone number:		
(1	Not related to the candid eputedacademic Institution	ates) (Gazetted Officer	s/Professors of		
	1.		2.		
19. A	ny other information you	ı may wish to add, incl	uding extra-curricular ac	tivities (use separa	te
heet	ifnecessary).				
			Declaration		
and n nfor [wil	othing has been concernation, my appointment	ealed/distorted. If at a ent shall be liable to ate and subsequently	any time, I am found to summary termination	o have concealed without notice.	y knowledgeand belie l/distorted any materia f offered appointment SAMEER assignments
Place Date:					

proof of items 3,6 and 10 should be enclosed)