Form No.

# GURU ANGAD DEV VETERINARY AND ANIMAL SCIENCES UNIVERSITY, LUDHIANA

Acknowledgment of Receipt of Application Form (Except the signature, rest to be filled in by the candidate)

Received application form for post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

from \_\_\_\_\_\_\_\_\_\_\_\_\_\_son/daughter/wife of

Shri \_

Signature of the official receiving the application

Seal/Stamp of the office Date of receipt

# ON INDIA GOVERNMENT SERVICE Stamp

to be affixed here for Rs. *5/-*

To

***Despatcher***

**0/o The Registrar**

**Guru Angad Dev Veterinary and**

**Animal Sciences University, Ludhiana**

**GURU ANGAD DEV VETERINARY** & **ANIMAL SCIENCES UNIVERSITY LUDHIANA- 141 004**

**APPLICATION FORM**

(For Officers, Teaching, Research and Extension Education Posts)

**BEFORE FILLING IN THE FORM, PLEASE READ THE INSTRUCTIONS/QUALIFICATIONS CAREFULLY**

A recent passport size

colour photograph

of the candidate (duly signed) must be

pasted here.

1. (a) Full name of the post applied for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(b) Advt. No.\_\_\_\_\_\_\_\_\_\_\_ Sr. No. of the post appeared in Newspaper.

1. Name in Full (in block letters)
2. Present postal address with pin code (in block letters) Candidate from abroad may state when he/she is

likely to come back to India and give his/her postal address in India

4. E-mail/ Telephone *I* Fax Number (if any)

*5.* Permanent address with pin code

1. Father's *I* Husband's name
2. Mother's Name
3. (a) Date and place of birth
   1. Nationality
   2. Marital Status (married/unmarried)

(if married, indicate if you have more than one living wife) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. (a) Mother tongue
   1. Other languages which you can read, write or speak
2. If you are employed (a) your present designation
   1. Name and address of your present employer
   2. Have you obtained the permission of your

present employer for submitting this application ?

(if yes, attach certificate)

* 1. If selected, please state when you can join
  2. Present pay (give basic pay and allowances separately)

(f) Date of next increment

(g) Minimum pay acceptable

1. Name and address of two referees (not related to you) (i) to whom you are known

personally. If you are employed, your present employer must be one of the referees (ii)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Details of Bank Draft attached on account of

Amount DD No. \_

prescribed Application Fee

1. Whether physically handicapped

Date

Yes/No

Bank \_

(if yes, attach a certificate issued by the Civil Surgeon of the place of which applicant is permanent resident. It would also be certified in the Medical certificate that the applicant is otherwise fit for the post he/she is applying for)

1. Details of academic qualifications :
2. Give below the particulars of the examinations passed from Matriculation *I* equivalent onwards.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Examination\* |  |  |  |  |
| Name of School or College |  |  |  |  |
| Year of Joining |  |  |  |  |
| Year of Passing |  |  |  |  |
| Name of Board or University |  |  |  |  |
| Maximum Marks *I* OGPA/OCPA |  |  |  |  |
| Marks OGPA/OCPA obtained\*\* |  |  |  |  |
| Percentage of marks |  |  |  |  |
| Division |  |  |  |  |
| Subjects |  |  |  |  |
| Position, Distinction, Prize, Scholarship, etc. |  |  |  |  |

\* Attach certified copies of the detailed marks certificates/transcripts of all the examinations passed.

\*\* Please attach a certified copy of the formula used by the university for converting OGPA/OCPA into percentage of marks.

1. Details of research work done to fulfil the requirements of degree :-

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of degree  Institution  Partly or wholly by research  Name and address of your major advisor/guide/supervisor  Field of research Title of thesis  Period spent  No. of publications based on research work (to be \* marked inthe list of publications under column 15) | From | To | From | To |

1. Details of other research work/training which is not in fulfillment of the requirements of a degree (senior fellowship/post doctoral-fellowship, etc) :

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Field of research 2. Institution 3. Period spent 4. No. of publications based on this research | From | To | From | To | From | To |

1. Complete list of publications giving Sr. No., Name of author(s) in same order as published, year, title, journal's name, volume and page numbers under the following headings. Please attach separate sheet(s)
2. Original research papers\* published in referred journals :
   1. Full papers
   2. Research notes

(b) Review papers

1. Invited papers
2. Full research papers published in the proceedings of conferences/symposia etc.
3. Books/Monographs
4. Bulletins/Manuals
5. Chapter contributed towards books
6. Popular articles :
   1. Published in journals
   2. Published in newspapers
7. Others
8. Participation in conferences/symposia/seminars/summer institutes/workshops etc. Please attach list.

Give only those papers/articles/books etc. which have already been published or have been accepted for publication



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(d) Have you passed National Eligibility Test (NET) Yes or No

(Attach Proof)



## 21. Details of leadership in academics/development activities, if any

## 22. Any other information not mentioned above which you think will strengthen your claim for the post applied for. If training or experience in a specialized field is one of the essential or desirable qualifications for the post, please give details (attach separate sheet, if necessary).

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**IDENTITY CERTIFICATE**

The certificate should be signed by any of the following:-

(i) Gazetted Officer of Central or State Government;

1. Member of Parliament or State Legislature;
2. Assistant Professor (or equivalent) or above and;
3. Principals and Headmasters of all recognized institutions.

Certified that l have known Shri/Smt./Kumari -------------------------

son/wife/daughter of Shri ---------------------------- for the last

-------- years ------ months and he/ she bears a good moral character.

Signature

(Name in block  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Letters)

Designation

Address

Official Seal/Stamp

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date  **\_\_\_\_\_\_**

\*Sr. No. SUMMARY **OF QUALIFICATIONS**

***(Submit 8 copies)***

Name of the Post \_

Scale of pay Salary demanded\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name, date of birth, address &  Present employment | Academic Qualifications and Training | | | | | Research/Teaching/Extension Education Experience | | | | \*\*\*No. of publications |
| Exam. | Year | University/Board | %age | Division/  Grade/Position | Designation/  Capacity\*\* | Period | | |
| Degree | From | To | Total |
| Name:  Date of birth : Address:  Present post : Scale of pay :  Salary and allowances : Employer: |  |  |  |  |  |  |  |  |  | (a)  (b)  (c)  (d)  (e)  (f)  (g)  (h) |
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\* The serial number is to be filled in by the office.

\*\* If research was carried on as a student, preparing for a degree, mention the degree also in this column. In case research was done in the capacity of a teacher give designation.

\*\*\* Please see item 15of the application form for details. The information given here should tally with the information under item 15.Different kinds of publications are (a) Original research papers published in referred journals, (b) Review papers, (c) Invited papers (d) Full research paper published in the proceedings of conferences/symposia etc., (e) Books/Monographs, (f) Bulletins/Manuals (authored/edited), (g) Chapters in books, (h)Popular articles and (i) Others

(Contd.)

***(Submit 8 copies)***



## Degree or others.



. It should be clearly mentioned whether the publication relate to Master's Degree/Ph.D.

