



SCHOOL OF PLANNING AND ARCHITECTURE

An "Institution of National Importance" under an Act of Parliament
(Ministry of Education, Govt. of India)
4, Block-B, Indraprastha Estate, New Delhi – 110 002
Tel: 011-23702382–80, Fax: 011-23702383 www.spa.ac.in

Application No.

To,

The Registrar,
School of Planning and Architecture,
4-Block-B, Indraprastha Estate,
New Delhi-110002

Affix your recent
Passport
size photograph
(self-attested)

Application form for the post of

Post Code

Particulars of the attached fee payment Receipt

Amount

TID/Receipt No.

Date

1. Name (in English):

2. Name (in Hindi)

3. Date of Birth:

Date

Month

Year

4. Postal Address:

State:

PIN Code:

Phone:

Mobile:

E-mail

5. Permanent Address:

State:

PIN Code:

6. Marital Status:

Category:

7. Are you seeking Age relaxation/ reservation? Yes /No.

8. Father's/Husband's:

A) Name in full

B) Present Postal address
(if deceased, give last address)

C) Profession (if in service, give
designation and office address)

9. Mother's Name:

10. Nationality of:

A) Applicant

B) Father

C) Mother

D) Husband/Spouse

11. Educational Qualification (from School level):

Year	Examination Passed	Board/ University	Class/Division	% of Marks

12. Particulars of positions held, (after possessing the prescribed essential educational/ technical qualifications):

Date of Joining	Date of Leaving	Designation with Salary (Pay Scale/ Consolidated Salary)	Name and address of Employer	Brief Description of Duties / Responsibilities

12. Professional/ training experience (Please attach a separate sheet).

13. Typing Speed (If applicable)

Shorthand Speed (If applicable)

14. Referees:

i) a) Name : _____

ii) a) Name : _____

b) Position : _____

b) Position : _____

c) Address : _____

c) Address : _____

d) E-Mail : _____

d) E-Mail : _____

e) Phone No : _____

e) Phone No : _____

f) Fax : _____

f) Fax : _____

APPLICANT'S DECLARATION

- (a) I hereby declare that the information provided in this form is true to the best of my knowledge and belief. I have satisfied myself that I fulfill all the eligibility criteria/ requirements.
- (b) I shall submit myself to the disciplinary jurisdiction of the Competent Authorities of the School who may be vested with the authority to exercise discipline under the Act/Statutes /Ordinances and the Rules that have been framed by the School.
- (c) I agree that the decision of the School on all matters will be final and binding on me.
- (d) I understand that my association active or passive with any unlawful organizations is forbidden.
- (e) I hereby declare that I have carefully read and understood the terms & instructions of the advertisement.

Date: _____

Signature of the Applicant

(For candidate in Government/Statutory Bodies service only)

Dated: _____

Signature and Designation of the Forwarding authority