

**Application form for Non-Teaching position purely on a contractual basis**

Post applied for : If applying for more than one post, apply separately :							
<b>(For office use only)</b>						Paste your recent passport size photograph here and sign across the photo so that part of signature should be on form	
Eligible .....(Yes /No) If not Eligible, reason thereof: ..... .....							
(Signatures of Screening Committee Members)							
1	Name (In Capital Letters)	First Name			Middle Name	Surname	
2	Date of birth	Day	Month	Year	Age as on last date of advertisement	Years	Months
3	Place of birth	City/Village			State	Country	
4	Mother's Name						
5	Father's Name						
6	Address  Email: Mobile:	Correspondence			Permanent		
7	Nationality						
8	Gender	Male/ Female :					
9	Marital status	Married/Unmarried/Divorced:					
10	If differently abled, indicate the relevant particulars				Yes/ No	Percentage of disability	Sl. No. of proof of enclosure
	a. Blindness or low vision:						
	b. Hearing impairment:						
	c. Locomotors disability or cerebral palsy (includes all cases of Orthopedically handicapped)						

**11. Educational Qualifications** (Attach additional pages, if required)

	Name of course	Board/ University	Year passed	Division	(if grading is applicable)	(If indicate equivalent to CGPA also)	Subjects studied	proof of enclosure
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
10th Class / equivalent								
10+2/Higher Secondary/ equivalent								
Bachelor's degree								
Master's degree								
Any Other Degree								

**12. Chronological list of Experience** (starting from current position/ employment)

Designation	Scale of pay & present Basic & AGP	Name & address of employer	Period of Experience			Nature of work/ duties	Sl. No. of proof of enclosure
			From	To	No. of Years/ Months (As on date of advertisement)		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)

\* (Add separate sheet if required, to be annexed at relevant Sl.No.)

**13. Names and complete postal addresses of 2 Referees**

(The referee should be the last employers of the candidate or any other person having know-how of candidate's experience/knowledge and should not be related to the applicant)

	Referee - 1	Referee - 2
Name & Complete postal address:		
Email:		
Phone (Landline) with STD code:		
Mobile:		
Fax:		

14. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No):
15. Do you have any case pending against you in any court of law?(Yes/No) :
16. Experience of Administrative work, if any (please furnish details) :

Capacity	Nature of work	Duration in years

17. Any other information/qualification relevant to the post applied for:

18. \_\_\_\_\_  
\_\_\_\_\_

19. Brief statement on your philosophy “how you can help in institutional development” :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 19. Declaration

I, \_\_\_\_\_ son/daughter of \_\_\_\_\_ hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected before or after the Selection Committee and University Authorities, my candidature/appointment may be cancelled by the University.

I have never been convicted or contemplated for any unlawful activity.

Signature of the Applicant

\_\_\_\_\_  
\*Name assigned (in BLOCK LETTER)

Date: \_\_\_\_\_

**20. Please tick the enclosures attached:**

Sl.	Check List	Sl. No. of enclosure	No. of Sheets	Page No from -- to
1.	Matric/Secondary/High School (10 <sup>th</sup> Class) Marks Sheet			
2.	Matric/Secondary/High School (10 <sup>th</sup> Class) Certificate			
3.	Sr. Secondary/Intermediate (12 <sup>th</sup> Class) Marks Sheet			
4.	Sr. Secondary/Intermediate (12 <sup>th</sup> Class) High School Certificate			
5.	Bachelor's Degree Final Year Marks Sheet			
6.	Bachelors' Degree Certificate			
7.	Master's Degree Final Year Marks Sheet			
8.	Master's Degree Certificate			
9.	Caste Certificate issued by the Competent Authority			
10.	Experience Certificate(s) from previous employer(s)			
11.	Endorsement from the present employer			
12.	Payment Details			
13.	Any Other(Pl Specify):			

Total number of sheets enclosed \_\_\_\_\_

(Please give sequential number to each sheet and signature with date).