1. Application for the post of Deptt									
2. PAN: 3. Adhar No.:									
. Na	me:		5. F/I	. F/H Name:					
. Coı	ntact No(s):								
. Edı	ucational Qualific	cation:							
.N.	Qualification	Subject(s)		Board / University			Year or passing		%age of marks
1.	10 th								
2.	12 th								
3.	UG								
4.	PG								
5.	Ph. D.								
6.	Any Other								
. Wh	ether UGC-NET (Qualified (Yes / No),	If Yes, Mont	th & Year o	of Passing:				
). E>	perience:								
N.	. Name of Employer			gnation	Monthly Salary	From (Date)		To (Date)	
•									
•									
•									
	inimum time rec	quired to join (if sele	ected):						
1. M									

Signature (with date)