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GAUHATI UNIVERSITY:: GUWAHATI-14: ASSAM

APPLICATION FORMAT FOR ADMINISTRATIVE POSTS

NB: Incomplete Applications, Applications without the application fees or without the signature are likely to be rejected.

a) ADVERTISEMENT NO. & DATE : Post No.:

b) NAME OF THE POST APPLIED FOR :

c) DEPARTMENT/CENTRE/OFFICE APPLIED FOR :

d) CATEGORY APPLIED FOR (PLEASE TICK) :

(attached copy of certificate to be submitted, except for UR)

UR	SC	ST	OBC	PWD	EX-SER

- Name in full (**in block letters**) :
- Father/Husband Name :
- Permanent Address (**in full**) :
.....
.....
Pin : Contact no. :
- Address for communication:
.....
Pin : Contact no.
- Email id :
- Date of birth in Christian era :
- Age on the date of application (**that is** :):
- Nationality :
- Religion :
- Sex:

11. Category (**SC/ST/OBC/PWD/EX-SER**) (**Pl. attach copy of certificate**) :

12. Details of Academic Qualifications (to be supported by attested photocopies) :

Exam Passed	Year of Passing	Div./Class	Percentage (%)	Name of the Board/University	Remark (if any)
Matriculation/HSLC					
PU/HSSLC					
BA/B.Sc./B.Com. & equivalent					
MA/M.Sc. & equivalent					
M.Phil					
Ph.D					
Others (please specify)					

13. Details of Past services : (**Pl. enclose supporting documents**):

Name of the post held	Name of the Institution	Length of services	Scale of Pay/Pay Band/Band Pay/AGP/GP as applicable	Temporary/ Permanent/ Ad-hoc etc.	Nature of duties	Remark, if any

14. Present position held with date :

15. Any Additional information, the candidate wishes to provide, if any (**Pl. attach additional sheet, if required**) :

16. Declaration :

I hereby declare that I have carefully read and understood the institutions and regulations referred here in and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case any of the information is found to be incorrect at any stage.

Signature of the applicant :

Date :

Name in full :

Place :

Designation/Department :

Address :

.....

LIST OF ENCLOSURES :

(Please attach, copies of certificates, sanction orders, papers etc. wherever necessary)

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

Signature of the applicant :

Date :