APPLICATION FORM TO BE FILLED UP BY CANDIDATE

Name of the post:- ...............................................

Affix the latest passport size photo

**1- PERSONAL DETAILS OF APPLICANT:**

|  |  |
| --- | --- |
| Name  (In Capital Letters) |  |
| Date of birth  (Day/Month/year) |  |
| Correspondence  Address |  |
| Permanent Address |  |
| Phone No. | Phone No:  Landline No: |
| Email |  |

**2. EDUCATIONAL QUALIFICATION (In Chronological order from latest to Graduation level)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S.  No. | Degree/  Examination | University | Year | Subject(s) | Grade/  Percentage of marks obtained | Distinctions |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**3. DETAILS OF EXPERIENCE (If any)**

|  |  |  |
| --- | --- | --- |
| a | Designation |  |
| b | Organization |  |
| c | Pay Scale |  |
| d | Date of appointment  to the present post |  |
| e | Total Experience  (In Years and Months) |  |

**4. Membership of Academic Bodies/Professional Bodies/Other Association:-**

|  |
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|  |

**5. STRENGTHS ( in 100 words)**

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|  |

**6. ANY OTHER INFORMATION RELEVANT TO CANDIDATURE:**

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I, hereby, declare that the statements/particulars made/furnished in this application are true, complete and correct to the best of my knowledge and belief. I also declare and fully understand that in the event of any information furnished being found false or incorrect at any stage, my application/candidature is liable to be summarily rejected at any stage and if I am already appointed, my services are liable to be terminated without any notice from the post of Director, above mentioned instutions, U.P. Lucknow as per Act/Statutes etc. and other applicable rules.

Place: (Signature of the Applicant)

Date: