



Application Form for Non-Teaching Position

[Please paste
Coloured Passport
size Photograph]

1. Details of application fee payment (if any)

| DD # | Date | Amount | Name of the Bank | Issuing Branch Name |
|------|------|--------|------------------|---------------------|
| | | | | |

2. Name of the post applied for :

Personal details

| | | | | | | | | |
|-----|---|--|-------|----------------------------|---------------------------------|-------------------------|--------|--|
| 3. | Name (in Capital Letters) | First Name | | | Middle Name | Surname | | |
| | | | | | | | | |
| 4. | Date of birth | Day | Month | Year | Age as on date of advertisement | Years | Months | |
| | | | | | | | | |
| 5. | Place of birth | City/ Village | | State | | Country | | |
| | | | | | | | | |
| 6. | Father's name | | | | | | | |
| 7. | Mother's name | | | | | | | |
| 8. | Nationality | | | | | 9. Gender: | | |
| 10. | Marital status | a. Married / Unmarried b. If married, name of spouse: | | | | | | |
| 11. | Community/ Category (delete those not applicable) | General | | | | | | |
| 12. | If physically disabled, indicate the relevant particulars | | | If applicable, Write 'yes' | Percentage of disability | S.No. of proof enclosed | | |
| | a. Blindness or low vision : | | | | | | | |
| | b. Hearing impairment | | | | | | | |
| | c. Locomotor disability or cerebral palsy (includes all cases of Orthopedically handicapped) | | | | | | | |

13. Educational qualifications (Attach additional pages, if required)

| | Name of the course | Name of the Board / University | Month & Year passing | Division | % of Marks | CGPA (if grading is applicable) | Subjects studied | S.No. of proof enclosed |
|-------------------------------------|--------------------|--------------------------------|----------------------|----------|------------|---------------------------------|------------------|-------------------------|
| 10 th Class / equivalent | | | | | | | | |
| 10+2 / equivalent | | | | | | | | |
| Bachelor's Degree | | | | | | | | |
| Master's Degree | | | | | | | | |
| Any other examination passed | | | | | | | | |

| 14. Chronological list of experience (Starting with the first appointment) | | | | | | | |
|--|--------------|-----------------------------|----------------------|---------|--|-------------------------|-------------------------|
| Designation | Scale of pay | Name & address of employers | Period of Experience | | | Nature of work / duties | S.No. of proof enclosed |
| | | | From date | To date | No. of years / months (As on date of advertisement) | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total period of experience | | | | | | | |

| 15. Names and complete postal addresses of 3 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) | | | |
|--|-----------|-----------|-----------|
| Names & complete postal addresses | Referee-1 | Referee-2 | Referee-3 |
| | | | |
| Email: | | | |
| Landline phone (with STD Code) | | | |
| Mobile Phone | | | |
| Fax | | | |

| 16. Present position details / If retired, last position details | | | | | | |
|--|--------------------------------------|-----------------|-----------------|-------------------------------------|-----------------------------|-------------------------|
| Designation | Name of the University / institution | Basic Pay (Rs.) | Pay Scale (Rs.) | Gross Pay / Total Salary p.m. (Rs.) | Increment date (Date/Month) | S.No. of proof enclosed |
| | | | | | | |

| 17. Languages known | | | |
|---------------------|---------|---------|----------|
| Language | Reading | Writing | Speaking |
| English | | | |
| Hindi | | | |
| Urdu | | | |
| Punjabi | | | |
| Dogri | | | |

18. Knowledge of Computers and Typing

| Course Undertaken | Org. / Institute | Year | Grade |
|-------------------|------------------|------|-------|
| | | | |
| | | | |
| | | | |

19. National / International Awards/ fellowship

| |
|--|
| |
|--|

20. Paragraph of self-evaluation regarding different fields of activity related to the job

| |
|--|
| |
|--|

21. Time required for joining, if selected:

| |
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| |
|--|

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

| |
|--|
| |
|--|

23. Candidate's Name & Address for correspondence :

| | | Mailing address | Permanent address | |
|--------------------------------|---------------------------------------|-----------------|-------------------|--|
| Name: | | | | |
| Complete Address with pin code | | | | |
| Email: | Phone No. (Landline with STD code) | Mobile No. | Fax No. | |
| | | | | |

24. Check list of self-attested testimonials attached (original to be produced at the time of interview). Please tick (☐) the ones applicable

- | | | |
|-------|--|--------------------------|
| i. | Matriculation marksheet / certificate | <input type="checkbox"/> |
| ii. | Intermediate marksheet / certificate | <input type="checkbox"/> |
| iii. | B.A./ B.Sc. /B.Com (Final) marksheet/ degree | <input type="checkbox"/> |
| iv. | M.A./ M.Sc. /M.Com(Final) marksheet/ degree | <input type="checkbox"/> |
| v. | L.L.B (Final) marksheet / degree | <input type="checkbox"/> |
| vi. | L.L.M marksheet / degree | <input type="checkbox"/> |
| vii. | Caste Certificate issued by the Competent Authority (OBC/SC/ST/etc.) | <input type="checkbox"/> |
| viii. | Experience certificates | <input type="checkbox"/> |
| ix. | Recommendation letter(s) | <input type="checkbox"/> |
| x. | Award (s) /Fellowship (s) | <input type="checkbox"/> |

xi. Other (s) Date of Birth, Computer Knowledge, Conferences / Training programme organised / attended.(03)



Total Number of above self-attested testimonials attached (in words :)

N.B. Applications without the above self-attested testimonials will not be entertained

| 25. Declaration | |
|---|---|
| I, _____, son/daughter of _____ hereby declare that all the entries made by me in this application are true, to the best of my knowledge and belief. No disciplinary / vigilance case has ever been held or contemplated or is pending against me. If anything is found false or incorrect at any stage, my candidature /appointment may be cancelled by the university without assigning any reason thereof. | |
| Date : _____ | Signature of the applicant _____ |
| | Name as signed (in BLOCK LETTERS) |
| | Application not signed by the candidate is liable to be rejected. |

| 26. Endorsement by the EMPLOYER | |
|--|---------------------------------------|
| a). In case of in-service candidates in Government/Semi-Government organizations/Public Sector Undertakings/Autonomous Organizations, the endorsement form must be signed by the employer. | |
| b). In case of in-service candidates from Private Sector, acceptance of resignation and relieving letter from the employer at the time of joining must be submitted. | |
| Forwarded to the | |
| The applicant Dr./Mr./Mrs/Ms. _____, who has submitted this application for the post of _____ in the SMVD University, has been working in this organization namely _____ in the post of _____ in a temporary / contract/ permanent capacity with effect from _____ in the Scale of Pay of He /She is drawing a basic pay of Rs. _____. His / Her next increment is due on Further, it is certified that no disciplinary / vigilance case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by the SMVD University. | |
| | (Signature of the forwarding officer) |
| | Name: |
| Designation: | Seal: |
| Date : | Place: |