



CENTRAL UNIVERSITY OF KASHMIR

FOR OFFICE USE ONLY
SERIAL NO.

APPLICATION FORM FOR NON-TEACHING POSTS (CONTRACTUAL)

Name of the post applied for.....

Advt. No.....Dated.....

Payment Details			
Name of the Bank	Challan Number	Date	Amount

PASTE HERE A
SIGNED COPY OF
YOUR RECENT
PASS-PORT SIZE
PHOTOGRAPH

A. General Information:

- Name in Full.....
(IN BLOCK LETTERS)
- Father's Name.....
- Husband's Name (in case of married Women).....
- Date of Birth: DayMonth.....Year.....
(As recorded in the Matriculation or equivalent certificate)
- Age (as on the last date fixed for the receipt of application)years.....months.
- Nationality
- Religion.....
- Marital Status: Married Unmarried
- Gender: Male Female
- Do you belong to any reserved category?: Yes No
If yes, specify the category (SC/ST/OBC)
- Whether Handicapped? : Yes No
If yes, indicate whether Physically/Visually/ any other.....
- Permanent Address
-
- PIN CODE.....Phone No.....Cell No.....
- Address for correspondence
-PIN CODE.....
- Email ID (Mandatory).....

B. Educational Qualifications:

Exam. Passed	Board/ University	Year of Passing	Marks		% of marks	Class/Div/ Grade	Subjects
			Obtained	Out of			
Matriculation (10 th)							
Higher Secondary/ Intermediate (10+2)							
Bachelor's degree							
Master's Degree							
M.Phil							
Ph.D							
NET/SLET							
Any other Degree/ Diploma							
Technical Qualifications (if any)							

C. Teaching/Administrative/Technical/Research Experience.

Designation	Name of the Organization	Scale of Pay		Nature of appointment	Period of service		
		PB	GP		From	To	Period

Note: Please attach separate sheet if the space is insufficient for the said column

State whether you have been at any time (a) dismissed, removed or debarred from Service or (b) convicted by a Criminal Court. (Please tick **YES** **NO**)

I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated.

Signature of the Applicant

Place.....

Date

Details of Enclosures (To be filled in by the candidate):-

Description of the Certificate/Testimonial/Attachment etc		
1.		9
2.		10
3.		11
4.		12
5.		13
6.		14
7.		15
8.		16
