

**APPLICATION FOR THE POST OF _____ ON AD-HOC BASIS FOR THE
ACADEMIC YEAR 2026-27**

Affix a
recent
passport size
photograph
with self-
attestation

1. Name of the Candidate (in Block Letters):
2. Father's/Husband's Name:
3. Date of Birth (as per SSC records):
4. a) Qualifications. Academic and Technical (from SSC onwards)
(Self-Attested Photostats in support of qualifications with marks memos)

Qualification With group/Branch	Name of the Institution and Board/University	Total marks	Marks Secured	% of Marks secured	Year of Passing
SSC					
DIPLOMA/INTER:					
B.Tech:					
M.Tech:					

(b) Higher Qualifications (Ph.D. etc.)

Name of the Degree	Name of the Institution	Marks Secured	% of Marks secured	Year of Passing	Branch
Ph.D.					

Note: -The candidates who possess the Provisional Certificate/Original certificate at the time of applying itself shall only be eligible to apply and will be considered qualified. Those who are pursuing higher studies shall not be considered to be possessing requisite qualifications as on the date of submission of application.

5. Experience (copy of Experience certificate must be enclosed):

Sl. No.	Name of the Organization & Address with Phone. No	Period of Service		Total Service in Years and months	Reference address and Contact number of the Issuing Authority
		From	To		

6. Community SC/ST/BC-A/B/C/D/E :
(Copy of caste certificate must be enclosed)
(Physically Handicapped (Differently Challenged)
copy of disability certificate issued by concerned Authority)

7. Name of the Educational Institutions where studied from Class 1st to 10th (enclose Study Certificate):

Class	Name of the School	Year of Study	Place of study Village/Town/City	District to which it belongs
I				
II				
III				
IV				
V				
VI				
VII				
VIII				
IX				
X				

8. a) Address for Correspondence with PIN Number

(Write in Block Letters)

:

b) Mobile Number

:

c) Land line with STD Code

:

d) Email ID

:

9. Any other information

:

The information furnished above is true and correct to the best of my knowledge and if the information furnished above is found to be incorrect in any way, I shall be held liable for the consequences thereof:

Place:

Date:

Signature of the Candidate
Name