**Jawaharlal Nehru University**

Recent Passport size self attested Photograph

**Proforma for application for the Non-Teaching Posts**

**on Deputation Basis**

NAME OF THE POST APPLIED FOR : ..............................................

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Full Name (in Capital letters) | | | | | | | | | | | : | |  | | | | | | | |
| 2. | Father’s Name | | | | | | | | | | | : | |  | | | | | | | |
| 3. | Mother’s Name | | | | | | | | | | | : | |  | | | | | | | |
| 4 | Husband’s Name  (In case of female married candidates ) | | | | | | | | | | | : | |  | | | | | | | |
| 5. | Nationality | | | | | | | | | | | : | |  | | | | | | | |
| 6. | (a) Address for communication | | | | | | | | | | | : | |  | | | | | | | |
| 8. | (b) Permanent Address  (c) E-mail ID  (d) Mobile phone No.  (e) Telephone No. | | | | | | | | | | | :  :  :  : | |  | | | | | | | |
| 9. | Date of Birth (DD/MM/YY) | | | | | | | | | | | : | |  | | | | | | | |
| 10. | Age as on the date of last date of receipt of application | | | | | | | | | | | : | | Years Months Days | | | | | | | |
| 11. | Date of Retirement (DD/MM/YY) | | | | | | | | | | | : | |  | | | | | | | |
| 12. | Category (SC/ST/OBC/GEN/PH) | | | | | | | | | | | : | |  | | | | | | | |
| 13. | Details of Educational Qualifications | | | | | | | | | | | : Enclosed self attested copies of all certificates | | | | | | | | | |
| Exam Passed | | | | | Institution/University | | | | | Subject studied | | | | | | | Duration of Study | Year of Passing | | % of marks | |
|  | | | | |  | | | | |  | | | | | | |  |  | |  | |
|  | | | | |  | | | | |  | | | | | | |  |  | |  | |
|  | | | | |  | | | | |  | | | | | | |  |  | |  | |
|  | | | | |  | | | | |  | | | | | | |  |  | |  | |
|  | | | | |  | | | | |  | | | | | | |  |  | |  | |
| 14. | | Details of Professional / Technical Educational Qualifications | | | | | | | | | | | : Enclosed self attested copies of all certificates | | | | | | | | |
| Exam Passed | | | | | | | Institution/ University | | Subject studied | | | | | | | Duration of Study | | Year of Passing | | | % of marks |
|  | | | | | | |  | |  | | | | | | |  | |  | | |  |
|  | | | | | | |  | |  | | | | | | |  | |  | | |  |
|  | | | | | | |  | |  | | | | | | |  | |  | | |  |
| 15. | | | | Details of Employment in chronological order (Candidates are advised to fill-up this column carefully and in terms of conditions stipulated in the Advertisement to avoid rejection) Enclose additional sheet duly authenticated your signature, if required. Enclosed self attested copies of all certificates. | | | | | | | | | | | | | | | | | |
| Name of Organization | | | | | | Post held | | Pay Scale and Basic Pay | | | Duration of Service | | | | | | | Nature of appointment (whether regular or adhoc) | Nature of duties  (full details) | | |
| From | | | | | To | |
|  | | | | | |  | |  | | |  | | | | |  | |  |  | | |
|  | | | | | |  | |  | | |  | | | | |  | |  |  | | |
|  | | | | | |  | |  | | |  | | | | |  | |  |  | | |
|  | | | | | |  | |  | | |  | | | | |  | |  |  | | |
| 16. | | | Please state clearly whether in the light of above entries made by you , you meet the requirement of the post | | | | | | | | | | : | |  | | | | | | |
| 17. | | | Do you hold the requisite years experience for the post applied for | | | | | | | | | | : | |  | | | | | | |
| 18. | | | Nature of present employment | | | | | | | | | | : | |  | | | | | | |
| 19. | | | In case the present employment is held on deputation/contract basis, please state :  a) The date of initial appointment :  b) Period of appointment on  deputation/contract :   * 1. Name of the parent office organization : | | | | | | | | | | :  :  :  : | |  | | | | | | |
| 20. | | | Are you in the revised scale of pay? If yes, date of revision and pre-revised scale. | | | | | | | | | | : | |  | | | | | | |
| 21. | | | Have you ever been imposed any penality. if yes please give details | | | | | | | | | | : | |  | | | | | | |
| 22. | | | If any departmental inquiry pending or contemplated against you. If yes please give details | | | | | | | | | | : | |  | | | | | | |
| 23. | | | Additional information, if any which you would like to mention in support of your suitability for the post | | | | | | | | | | : | |  | | | | | | |
| 24. | | | **DECLARATION**: (i) I hereby declare that I fulfil the eligibility conditions as per the advertisement and that all the statements made 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 or incorrect at any stage or not satisfying the eligibility conditions according to the requirement mentioned in the advertisement, my candidature / appointment is liable to be cancelled / terminated. (ii) I have enclosed the required attested copies of the certificates. | | | | | | | | | | | | | | | | | | |

Place :

Date : Signature ...................

Name of the Applicant

**Certificate to be furnished by the Employer/ Head of office/ forwarding authority**

1. Certified that the particulars furnished by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ are correct and he/she possesses educational qualifications and experience mentioned in the vacancy circular and this department has no objection for his applying for the post of.............................................

1. Also Certified that: -
   1. There is no vigilance or disciplinary case pending / contemplated against

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

* 1. His / her integrity is beyond doubt.
  2. Copies of his / her ACRs for last five years, attested on each page by an officer not below the rank of Under Secretary to Govt. of India are enclosed.
  3. No major /minor penalty has been imposed on him / her during the last ten years\*
  4. A list of major / minor penalties imposed on him/her during the last ten years is enclosed.\*

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_

Place: Name & Designation

Tel. No. and e-mail ID

Date: Full office address and Seal

**List of Enclosures** :

1.

2.

3.

4.

Note : \* Strike out which is not applicable