



SHIBLI NATIONAL COLLEGE, AZAMGARH

To,

**THE MANAGER/SECRETARY
SHIBLI NATIONAL COLLEGE
AZAMGARH**

Passport size recent
Photograph
Duly signed by the
applicant

Advt. No.....Published in.....

Dated.....

Name of the Post Applied for **Assistant Professor (S.F.)**.....

NAME OF THE CANDIDATE: **MR/MS/DR**.....

Particulars of Payment of application fee

DD		Issuing Bank & Branch	Value (Rs.)	In Favor of
No.	Date			
				Manager, Shibli National College, Azamgarh

1. Candidate's Name in full **Mr/Ms/Dr**

(In Capital Letters)

2. Father's/Husband's Name in Full

3. Mother's Name

4. Mailing Address H.NO.:, Street/Village:

Post office:

District:State:

Pin Code:

Mobile No.

Email ID

5. Permanent Address H.NO.:, Street/Village:

(if different from the
mailing one)

Post office:

District:State:

Pin Code:

Mobile No.

Email ID

6. Date of Birth 6. Place and State of Birth

7. Nationality:

8. ACADEMIC DETILS

Class/Degree	Board / University	Year	Total Marks	Marks Obtained	% of Marks / CGPA	Subjects
High School / Equivalent						
Intermediate / Equivalent						
Graduation						
B.Ed.						
Post Graduation						
M.Ed.						
NET / JRF						
M.Phil.						
Ph.D. / D.Phil						
Other qualification (if any)						

9. Earlier Employment Details, if any (Proof to be attached):

S. No.	Institute	Designation	Period	
			From	To
1.				
2.				
3.				

10. Total years of Teaching Experience (Proof to be attached):

- (i) Undergraduate level
- (ii) Post-graduate level

Declaration: I do hereby declare that the information furnished by me in the application form are true to the best of my knowledge and belief.

Date:
Place:

Signature of the Candidate

Signature of the Forwarding Authority With Seal
(only for the candidates already in service)

Name:

Designation: