



SHIBLI NATIONAL COLLEGE, AZAMGARH

To,

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

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

Dated.....

Name of the Post Applied for-

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

Passport size recent
Photograph
Duly signed by the
applicant

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.....

7. Place and State of Birth.....

8. Nationality:.....

9. ACADEMIC DETAILS:

Class/Degree	Board / University	Year	Total Marks	Marks Obtained	% of Marks /CGPA	Subjects
High School/ Equivalent						
Intermediate/ Equivalent						
Graduation						
CCC by NIELIT (Previously DOEACC) or Equivalent						
Diploma/Certificate in Library Science						
Other qualific ations	1					
	2					
	3					
	4					

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

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

Declaration: I do hereby declare that all 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: