

Application No.

**SHRI JAGANNATH SANSKRIT VISHVAVIDYALAYA
SHRI VIHAR, PURI**



PHOTO

APPLICATION FORMAT (TEACHING)

APPLICATION FORM FOR THE POST OF _____

(The entries in this form should be made in English by the candidate in his/her best handwriting. If the space under the reading below is inadequate, information may be given in a separate sheet and attached to the form. Application incomplete in any respect will not be entertained)

Demand Draft No. & Date: _____

Name of the Bank and Place: _____

Amount of the D.D _____

1. Full Name of the Candidate
(in Block Letters) _____

2. Father's Name _____

3. a) Marital Status: _____

b) If married, whether he has more
than one wife living: _____

4. In case of Married Woman,
Name of Husband _____

5. Permanent home address: _____

6. Present Address in full
(with PIN Code): _____

(Any change should be reported at
once to the Registrar, Shri
Jagannath Sanskrit
Vishva Vidyalaya, Shri Vihar, Puri

7. Contact Telephone/Mobile No./e-mail: _____

8. Date of Birth
(as per HSC Certificate or
Equivalent) _____

P.T.O.

9. Sex (Male/Female): _____

10. Nationality: _____

11. a) Candidate's Mother Tongue: _____

b) Other Languages Known:

Language	R	W	Speak

12. a) Whether Scheduled Caste/ Scheduled Tribe/ SEBC YES/ NO

(If yes, certificate in support thereof from the competent authority should be enclosed):

Put a (√) Mark

SC	ST	SEBC

b) Whether person with disability (If yes, certificate from an Officer not below the rank of Civil Surgeon should be enclosed).

13. Academic qualification: _____

(Examinations passed from Matriculation/Higher Secondary onwards to Doctorate degree), etc. full and exact details must be given. A copy of the certificate and mark sheet of each examination attested by a Gazetted Officer should be attached to this application).

Examination or degree passed	Name of the Board/University	Subjects taken	% of marks obtained	Total marks/ Maximum marks	Year of passing
High School/HSC					
Intermediate/ Higher Secondary Examination					
Bachelor Degree					
Post-Graduate					
M. Phil.					
Doctorate					
Others					

14. Whether employed in any Government or Non-Government Office/ University/ Corporation / Local Body, and if so, full particulars thereof (Administrative/ Other experience, if any, providing the proof of experience from the authority). Please enclose separate sheet (duly signed) , if not covered within the columns .

Name of the Institution / Department / Organisation	Designation	Name of the Post	Period (give date)		Appointing Authority	Remarks if any
			From	To		

15. List of Research Publications
(Inclusive of Books, Research/Policy Papers) (Use separate sheet duly signed) _____

16. a) Name of the present employer and organization (if employed): _____

b) Present employment details: _____

i) Post held: _____

ii) Date of appointment: _____

iii) Whether permanent/ Temporary or on Probation: _____

iv) Whether State/Central Government/PSU/Private/ any other: _____

v) Scale of pay _____

vi) Whether present pay acceptable or not. _____

17. a) Have you ever been subjected to any disciplinary action, as a student and/ or as an employee? _____

b) Have you ever been dismissed/ suspended from service/ employment? if so, please specify: _____

c) Do you have any police record? _____
If yes, give details:

d) Whether any court case pending _____
against you? If yes, give full
details:

18. If appointed, when can you join the _____
Post?

19. Any other information: _____

20. Furnish the list of documents enclosed to the application (attach separate sheet, if required):

1)

2)

3)

4)

5)

21. **Declaration to be signed by the candidate**

I solemnly declare that the entries made in this form are correct and true to the best of my knowledge and belief. If at any time, I am found to have concealed/ suppressed any material/ information or given any false details, my appointment shall be liable to be summarily terminated without notice or compensation.

Place:

Signature of the candidate

Date:

(in full)

22. Forwarded with the remarks that the institution/ organization has no objection to the candidature of the applicant being considered for the post applied for, as above.

Place:

Date:

Fax:

E-mail

Signature

Authorized officer / Head of the Institution/ Organization

Designation(seal)