

NAGALAND UNIVERSITY

(A Central University Estd. By the Act of Parliament No.35 of 1989) Headquarters: Lumami - 798627

APPLICATION FORM FOR Non-TEACHING POSTS

Affix Latest Colour Passport Photograph

APPLICATION FOR THE POST OF	
Advertisement No and Date:	
Post Sl.No. and Scale of Pay:	
1. Full Name in Block Letters:	
2. Father's/Husband Name:	
3. Mother's Name:	
4. Date of Birth (evidence to enclosed):	
5. Age (as on 20.03.2013):	
6. Sex: Male/Female:	
7. Nationality:8. Religion	
9. Do you belong to Schedule Caste/Schedule Tribe/ OBC (copies of evidence to be enclosed) :	
10. Permanent Address (in full) with nearest Police station:	
11. Postal Address (in full) for correspondence:	

12. Telephone/Mobile No:									
13. E-mail ad	ldress: _								
14. Indicate i	f you aı	e applyin	g aga	inst reserve	ed pos	t for: (Ex-S	S.M)/S	C/ST/O	BC/ Specially
Challenge	d Perso	on/Outsta	nding	sports pers	son):_				
15. Details of Ex supported with					tion/S	chool leavi	ng cert	ificate	onwards (To be
Name of the School Board/Council, C and Universit	ollege	Examina passe		Class or Division		cs obtained in ercentage	Ye	ear	Subject of studies
16. Technical qualification if any (Enclose true copies duly attested). Name of the School with Research Company (Enclose true copies duly attested).									
Board/Council, C	ollege	Examina passe		Class or Division		cs obtained in ercentage	Y	ear	Subject of studies
							<u> </u>		
17. Particulars of Previous Experience									
Name of the Organization/ Institution	Post(s) Held So		Scale of pay		Duration		ire of	Reason of leaving	

Details of present Employment (To be supported with certificate from the employer)
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	Name of the Organization/ Institution Position Held Scale of pay Scale of pay Remuneration: Basic pay, other pay if any, D.A. other Allowances, Total Nature of works							
)								
Specify additional qualifications/experience (Sports, Music, Literary and Social Activities etc.)								

20. Give name of two persons for	(reference), not related to you, with full address:
Name	Name
Occupation	Occupation
Address	Address
Phone No.	Phone No.
Fax	Fax
e-mail	e-mail

Particulars of remittance:

Amount Rs. _____ (Rupees ______) only

Date of deposit _____ Name of the Bank with address ______

Branch Code No. _____

	st of my knowledge and belief. In the event of any in adidature/services are liable to be terminated without	•
Dated:		
		Signature of the applicant
	(TO BE FILLED BY THE EMPLOYEE FOR CAND	IDATE ALREADY IN SERVICE)
1	This is to certify that Mr./Ms/Dr	has been serving in this
	organization in the position of	since
2	To the best of my knowledge the information furnished application are true.	d by Mr./Ms/Dr in this
3	This Institution /Organization do not have any objection for his	s/her application for the post applied.
Date:		Registrar/Principal Official authorized to sign on behalf of the Organization
Note:		die Organization
1.	Where space provided in the form is found to be inadequate, numbers under which additional information is supplied.	annexure may be given in plain paper quoting the

One set of true copies of academic certificates, mark-sheets, and two copies of recent photographs (passport

5. Persons already in employment must route their application through proper channel along with No Objection

2. Nagaland University reserves the right not to fill up any of the vacancies.

The University may raise the standard of qualification, experience etc. at its discretion.

size) testimonial should accompany the application, in all cases

Certificate from their employer.

I hereby declare that the entries made in this form as above is true and correct to the