**GURU NANAK KHALSA GIRLS COLLEGE BABA SANG DHESIAN,JALANDHAR**

 **Performa for Application**

**Note:-**

**1 .Persons already in employment must send their applications through**

 **their employers , otherwise these will not be entertained .**

**2. All Columns should be properly filled in. Incomplete applications are liable**

 **to be ignored.**

**3. Total fees Rs.250/- ( non-refundable) can either be deposited at Cash Counter, Guru Nanak Khalsa Girls College Baba Sang Dhesian or through a crossed A/C payee Bank Draft in favour of President, Guru Nanak Khalsa Girls .College Baba Sang Dhesian payable at Goraya.**

**4. Attested copies of all certificates and detail marks cards, testimonial must be attached. Originals will have to be shown at the time of interview.**

**5. Separate application is required for each Post/ Department/ Station.**

**6. Please send the form of application to President, Guru Nanak Khalsa Girls College Baba Sang Dhesian.**

 1. Name in full Mr./Miss/Mrs(Block Letters).……………………………………

 2. Sex : M/F ………………………………………………………….

 3. a.)Correspondence Address …………………………………………………..

 ………………………………………………………………………………...

 Tel………………………Fax…………………Email……………………………

 b.) Permanent Home Address………………………………………………

 …………………………………………………………………………………

4 . Post applied for…………………………………….Advt.No…………………...

 Department/Office………………………………………Station……………….

 Area of Specialization………………………………………………………….

5.(i) If selected, how much time would you require for joining the post ?

 (ii) Pay acceptable………………………………………………………………..

6.(i) Date of Birth …………………(ii) Place of Birth………………………….

7. Nationality………………………………………………………….

(i). A citizen of India by birth and/ or by domicile? …………………………….

8. Name of the State to which you belong…………………………………………

9. Specify if you belong to any of the following:

(a) Scheduled Caste/ Tribe…………………………………………………………..

(b) Backward Class…………………………………………………………………

© Disabilities Category:…………………………………………………………….

1. Blindness or Low Vision……………………………………………………
2. Deaf/ Hearing impairment………………………………………………….
3. Orthopedically handicapped………………………………………………

**(Please state the correct position and attach certificate in support thereof issued by the competent authority)**

10.(i) whether married or single?................................................................................

 (ii) If married, the number of children……………………………………………

11. Were you ever prosecuted or convicted?..............................................................

12. Are you a dismissed employee? State ‘Yes’ or ‘No’……………………………

 (If yes, reason thereof)………………………………………………...

13. were you ever disqualified from appearing in any university examination/ undertaking University work? State ‘Yes’ or ‘No’………………………………….

**14. Employment: Give particulars concerning all periods of employment of a professional nature:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of employer** | **Date of joining** | **Date of Leaving** | **Position** |
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| --- | --- | --- |
| **Nature of duty or work** | **Name of Head under whom worked** | **Basic pay p.m. with the Grade** |
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**15. Education:** Give particulars concerning University or other higher or technical education or of post- doctoral research. Mention all examinations passed, the degrees and qualifications obtained commencing from the matriculation or equivalent examination. Attach copies of all the DMCs, Degrees & certificates:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Examination (S) passed** | **Board/ University**  | **Year of passing**  | **Subjects** | **Marks Obtained /Max. Marks** | **% of Marks** | **Class/division/ Grade Honours or Distinction** | **Mode of Exam Passed(Regular, Part time/Distance Education/Lateral Entry)** |
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**16. Particulars of having passed NET/JET/GATE etc:**

Name of Test \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month & Year \_\_\_\_\_\_\_\_\_\_\_\_ Roll No \_\_\_\_\_\_\_\_

17**. Which languages (including Indian languages) can you read, write and/or speak?**

Give Particulars and the examinations, if any, passed in each.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Read Only**  | **Speak Only** | **Read or Speak**  | **Read ,Write or Speak** | **Examination Passed**  |
|  |  |  |  |  |
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**18. Details of Publications** (Mention numbers only). Attach a complete list of Publications with respect to each category, giving full particulars?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Published**  | **In Press** | **Accepted** | **Communicated** |
| **1 Books** |  |  |  |  |
| 1.1 Reference/Text Books |  |  |  |  |
| 1.2 Edited Books |  |  |  |  |
| 1.3 Other Books |  |  |  |  |
| **2 Articles** |  |  |  |  |
| 2.1 In Foreign International Journals |  |  |  |  |
| 2.2 Referral Journals |  |  |  |  |
| 2.3 Non Referral Journals |  |  |  |  |
| 2.4 Other Articles |  |  |  |  |
| **3 Abstracts** |  |  |  |  |
| **4 Manuals, etc.** |  |  |  |  |
| **5 Any other(specify)** |  |  |  |  |

19. Teaching/Research Experience :

**Experience in Universities/ Affiliated Colleges/ and or in Nationally/ Internationally recognized Research Institutions/ Laboratories**.

 **(A) Teaching Experience:**

 (i) Post Graduate Classes\_\_\_\_\_\_\_\_Years \_\_\_\_\_\_\_\_\_\_Months

 (ii) Degree Classes …………… Years \_\_\_\_\_\_\_\_\_Months

**(B) Research Experience**: \_\_\_\_\_\_\_\_Years \_\_\_\_\_\_\_\_\_Months

20. Experience of supervising research or administration (Give details) :

21. **References** : These should be professionally competent persons who are well acquainted with the applicant’s training, accomplishments, capabilities and the character but must not be relations. Three references should be listed and at least two of them should be citizens of India. For applicant’s having done post-graduate or post-doctoral research, the research supervisors must be listed. Employer of each major employment and of the present/latest employment must be listed.

1. Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation or Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

or Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation or Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

22. Copies of testimonials from:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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23.Academic achievements and extracurricular activities(Give details):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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24.**Additional remarks:** The applicant may mention here any special qualification or experience

 Which have not been included under the heads given above. If the space is insufficient,

 Attach a separate sheet and indicate here.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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25. **List of enclosures sent with the application:**

 (i)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (iii)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (iv) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (v)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (vi) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

26. **Marks scored as per API based Performance Based Appraisal System (PBAS)**

(for the post of Professor /Associate Professor or equivalent grade post.):\_\_\_\_\_\_\_\_\_\_\_\_

 (To be filled in by the candidates)

27. Details Bank Draft attached / University Fee Receipt No.:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Bank** | **Bank Draft No.** |  **Date** | **Amount** |
|  |  |  |  |

 I hereby solemnly declare that all the entries in this form are true to the best of my knowledge and belief. I understand that any material mis-representation or omission made, render me liable to termination or dismissal.

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of the Candidates

 ***Recommendation of the employer***

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature and designation of the employer

 Seal of the office

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **GURU NANAK KHALSA GIRLS COLLEGE BABA SANG DHESIAN,JALANDHAR**

 **Please fill in the following slips for correspondence address:**

|  |  |  |
| --- | --- | --- |
| Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pin: \_\_\_\_\_\_\_\_\_\_\_\_\_Contact No.\_\_\_\_\_\_\_ |  | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pin: \_\_\_\_\_\_\_\_\_\_\_\_\_Contact No.\_\_\_\_\_\_\_ |

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| --- | --- | --- |
| Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pin: \_\_\_\_\_\_\_\_\_\_\_\_\_Contact No.\_\_\_\_\_\_\_ |  | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pin: \_\_\_\_\_\_\_\_\_\_\_\_\_Contact No.\_\_\_\_\_\_\_ |