



GONDWANA UNIVERSITY GADCHIROLI

(A State University Established by Government of Maharashtra)

Model Degree College

Application Form No: _____

Recruitment Notice No.GUG/48/2022

Date:-28/10/2022

To,
The Registrar
Gondwana University, Gadchiroli,
M.I.D.C. Road, Complex, Gadchiroli,
Gadchiroli - 442605 (M.S.)

Passport
Size
Photograph

Subject: - Application for the Post of :-

Name of the Post	:-	
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Sir,

I hereby submit my application for the post mentioned above with the following details.

APPLICATION FORM

1. Personal Details (In Capital Letter's)			Enclosure No.
Full Name (Surname First)			
Date of Birth (dd/mm/yy)		Age (In Years) at the time of application	
Gender (Male/Female)		Marital Status	
Nationality		Religion	
Category With Caste (SC/ST/VJ-A/NT- (B/C/D)/OBC/OPEN/Divyang,etc.			
Particulars of Physical Disability, if Applicable			

2. Address	
Address for Correspondence	Permanent Address
Pin Code:	Pin Code:

3. Communication Details(Should not be change during process)	
E-mail ID	
Phone No.	
Mobile No.	

4. Educational Qualifications(Matriculation onward)					Enclosure No.
Name of Exam/Degree	University/ Institution/Board	Year of Passing	Percentage of Marks	Division /Class/CGPA	

(Please use an additional sheet, if required, retaining the above tabular format)

5. Experience if any								Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University / Institution	Period		Total Experience			
			From	To	Y	M	D	

[Attach Appointment Order]

Special contributions, if any :

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(Enclose additional sheet, if required, in the same format)

6. Competence in Computer Applications & IT enabled services	Enclosure No.
<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	

7. Total No. of Enclosure Attached :- _____
(Attach the list of enclosures along with page numbers for convenience)

Date :- _____

Place :- _____

 (Name & Signature of the Applicant)

DECLARATION - I	
<p>I, hereby, declare that, all information submitted in this application and in its accompaniments is true, complete and correct to the best of my knowledge and belief. I accept that in the event of any information being found false, incomplete, or incorrect, my candidature / appointment for the post of ----- ----- is liable to be cancelled / terminated at any stage. I further understand that no cognizance shall be taken of any request for withdrawal of my application. I have read carefully all instructions given in the employment Notice No. ----- Dated ----- ----- on the website of the University.</p>	
DATE :- -----	
PLACE :- -----	_____ (Name & Signature of Applicant)