

GONDWANA UNIVERSITY GADCHIROLI

(A State University Established by Government of Maharashtra)

Model Degree College

Application Form No: _

Recruitment Notice No.GUG/54/2024

Date:-01/01/2024

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	:-	Principal, Model Degree College

Sir,

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

APPLICATION FORM

1. Personal Details(In Capito	al Letter's)	Enclosure No.
Full Name (Surname First)		
Date of Birth (dd/mm/yy)	Age (In Years) at the time of application	7944 F.
Gender (Male/Female)	Marital Status	
Nationality	Religion	
Category With Caste (SC/ST/VJ-A/NT- (B/C/D)/OBC/OPEN/Divyang,etc.		- 1
Particulars of Physical Disability, if Applicable		

2. Addre	s for Correspo	, T	· · · · · · · · · · · · · · · · · · ·	_					
Addres	Permanent Address								
Pin Code:	Pin Code:								
3. Com	nunication D	etails(Should	l not be c	han	ge duri	ng pr	oce	ss)	
E-mail ID									
Phone No.									
Mobile No.									
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Name of	ational Quali University		Percent		Divis	sion	E	cnclosure	
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5. Ехре	rience if any								
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6. Competence in Computer Applications& IT	enabled services	Enclosure No.
7. Total No. of Enclosure Attached:		
(Attach the list of enclosures along with pa	age numbers for conve	nience)
Data		
Date :		
Place :		
<u> </u>		
(Name &	Signature of the Appli	cant)
DECLARATION -		
I, hereby, declare that, all information submi	tted in this application	and in its
accompaniments is true, complete and correct t	to the best of my know	ledge and
belief. I accept that in the event of any information	n being found false, incom	mplete, or
incorrect, my candidature/appointment for the po		
is liable to be		
stage. I further understand that no cognizance		_
withdrawal of my application. I have read caref		
employment Notice No		
on the website of the Uni	versity.	
DATE :		
PLACE :		
	(Name & Signature of A	Applicant)