



# GONDWANA UNIVERSITY GADCHIROLI

(A State University Established by Government of Maharashtra)

Application Form No. \_\_\_\_\_  
(For office use only)

Employment Notice No. **GUG/45/2022**

Date:- **29/07/2022**

**To,**  
THE REGISTRAR  
Gondwana University, Gadchiroli,  
M.I.D.C. Road, Complex, Gadchiroli,  
Dist-Gadchiroli, PinCode-442605.

Passport  
Size  
Photograph

**Subject: - Application for the Post of:-** .....

Name of the Post	:-	
Post Advt. No.	:-	
Subject/Department	:-	
Category	:-	

**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) as on <b>/08/2022</b>	
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:

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

<b>4. Fees Details</b>	
D.D. Number & Date	
Name of the Bank	
Amount	

<b>5. Educational Qualifications</b> ( <i>Matriculation onward</i> )					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)

<b>Ph. D.</b> (Mark ✓ in Appropriate Box)	Degree [ ] Awarded	<b>M. Phil.</b>	Degree [ ] Awarded	
<b>Title of Thesis/Dissertation</b> ( <i>If Published, give details on a separate sheet</i> )				Enclosure No.
Ph. D.				
M. Phil.				
P. G.				
Particulars of NET / SET / SLET/ GATE or Equivalent Examinations				




Total Experience : [ -----Y(Years)][ -----M(Months)][ -----D(Days)]

**Special contributions, if any :**

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.....

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.....

.....

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

8. Research Experience :		Enclosure No.
Number of Ph. D./M.Phil. Degrees Awarded under Supervision	Ph.D[    ], M.Phil [    ]	
Number of Ph. D. Thesis Submitted under Supervision	[    ]	
Number of Ph. D. Students Registered under Supervision	[    ]	
Total Research Experience	[ -----Y(Years)][ -----M(Months)][ -----D(Days)]	

9. Publications :								Enclosure No.
Number of Books Published :		[    ] Own	[    ] Joint Authorship					
Number of Books Edited :		[    ] Own	[    ] Joint Authorship					
Number of Research Papers Published :		[    ] Own	[    ] Joint Authorship					
<b>Own</b>				<b>Joint Authorship</b>				
International Journals	National Journals	International conference / Seminars / Symposium	National conference / Seminars / Symposium	International Journals	National Journals	International conference / Seminars / Symposium	National conference / Seminars / Symposium	
[    ]	[    ]	[    ]	[    ]	[    ]	[    ]	[    ]	[    ]	
<b>Note : Give the details of Publications on separate sheets</b>								

<b>10. Competence in Computer Applications :</b>	Enclosure No.
..... ..... ..... ..... ..... ..... ..... .....	
<b>11. Additional Information about representing the University/ College at the inter-university/intercollegiate competitions or the State and/or National Championships and Extracurricular, Co-curricular and extension Activities, if any : ( Use separate sheets, if necessary)</b>	Enclosure No.
..... ..... ..... ..... ..... ..... ..... ..... .....	

<b>12. Total No. of Enclosure Attached :- _____          (Attach the list of enclosures along with page numbers for convenience)</b>
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Date :- \_\_\_\_\_

Place :- \_\_\_\_\_

\_\_\_\_\_  
 (Name & Signature of Applicant)

**DECLARATION - I**

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.

DATE :- -----

PLACE :- -----

\_\_\_\_\_  
(Name & Signature of Applicant)

**DECLARATION - II**

I, Dr./Shri/Mrs./Ms. -----  
Son / Daughter / Husband / Wife of Shri -----  
aged ----- years resident at -----  
-----

do hereby declare as follows :-

1. That I have filled my application for the post of -----
2. I have ----- (-----Number) living children as on today, out of which number of children born after 28<sup>th</sup> March, 2005 is / are -----  
----- (Mention date of Birth, if any.)
3. I am aware that if total number of living children are more than two, due to the children born after 28<sup>th</sup> March, 2006, I am liable to be disqualified for the same post.

DATE :- -----

PLACE :- -----

\_\_\_\_\_  
(Name & Signature of Applicant)