

12

GONDWANA UNIVERSITY GADCHIROLI

(A State University Established by Government of Maharashtra)

Model Degree College

Application Form No:

	1	13	94	1.	TR	
			1.1		3.4	

Recruitment Notice No.GUG/56/2024

To,

The Registrar

Gondwana University, Gadchiroli, M.I.D.C. Road, Complex, Gadchiroli, Gadchiroli – 442605 (M.S.) Date:- 15/06/2024

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	
Gender (Male/Female)	Marital Status	I
Nationality	Religion	
Category With Caste (SC/ST/VJ-A/NT- (B/C/D)/OBC/OPEN/Divyang,etc.		
Particulars of Physical Disability, if Applicable		

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.					

Name of Exam/Degree	tional Qualificat University/ Institution/Board	Year of Passing	Percentage of Marks	Division /Class/CGPA	Enclosure No.
		đ			
			-		
	5				
]	<u> </u>		

5. Experience if any								
Post Held	Basic Pay & Pay Band with A.G.P.	University / Institution	Period		Total Experience			Enclosure No.
			From	То	Y	M	D	
		$\frac{1}{2} \frac{3}{1} \frac{3}$						
[Attach App	ointment Ord	er]						
	ntributions, i							
					•••••			
				•••••	•••••	• • • • • •	• • • • • • • • •	
(Enclose add	litional sheet, if	required, in th	e same for	mat)				

 $\begin{array}{c} \mathbb{C}_{1} & \mathbb{C}_{2} \\ \mathbb{C}_{1} & \mathbb{C}_{2} \end{array}$

6. Competence in Computer Applications& IT enabled services	Enclosure No.
Nation A	

A TOUS

ir d cutress (

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

It bf he la

Date :	
Place :	

(Name & Signature of the Applicant)

DATE :- -----PLACE :- -----

(Name & Signature of Applicant)