

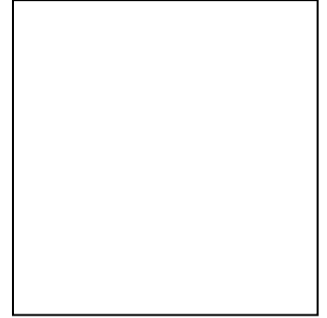


Application No. :- \_\_\_\_\_  
(To be filled in by the University Office)

**SHREEMATI NATHIBAI DAMODAR THACKERSEY  
WOMEN'S UNIVERSITY,**

1, Nathibai Thackersey Road, Mumbai - 400 020.

**APPLICATION FOR EMPLOYMENT (TEACHING STAFF)**



Post Applied for : \_\_\_\_\_ Post Code No. \_\_\_\_\_

Advertised No : \_\_\_\_\_ Year : \_\_\_\_\_ Name of the News Paper \_\_\_\_\_

Name of College / Department: \_\_\_\_\_

1. Name in full Mr./Mrs./Miss \_\_\_\_\_  
(IN BLOCK LETTERS) (Surname) (First Name) (Father's / Husband's Name)

2. Postal Address in full : \_\_\_\_\_  
(IN BLOCK LETTERS) \_\_\_\_\_

\_\_\_\_\_ PIN CODE NO. \_\_\_\_\_

3. Telephone No. (if any) :  
(Office) : \_\_\_\_\_ (Resi.) : \_\_\_\_\_

Mobile No.: \_\_\_\_\_ Email Id : \_\_\_\_\_

4. Personal Details :

Age	Date of Birth	Married / Single	Number & age of Children, if any	Nationality	Specify the caste if belonging to SC/ST/DT-NT /OBC with support of caste certificate

5. Language known (Please give details and ✓ in appropriate columns)

Mother-tongue :	Read	Write	Speak
Other languages 1.			
2.			
3.			

6. Educational qualification beginning with S.S.C. / H.S.C. or equivalent Examination :

Examination passed	Class	Percentage	Year of passing	Name of Board / University	Medium through which studied	Subject/s of Specialization

7. Teaching Experience

Name of Institution	Designation (if full time/ part-time or visiting, mention of same be made)	Subject taught specifying level (i.e. Jr. College/ Graduate/Post Graduate level etc.)	Period	
			From	To

8. Any other Experience

Name of Organization	Designation	Nature of Work	Period	
			From	To

9. Please give below the title of Thesis/Dissertation approved/submitted for M.Phil., Ph.D., etc. and name of the Guide

Title of Thesis/Dissertation	Name of the Guide	Year of approval/submission

10. Brief Description of research work done or directed (other than research undertaken during Post-Graduate Studies) (if list is long same be appended)

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11. Publications (if list is long same be appended)

(a) Articles :

(b) Research Papers :

(c) Books etc. :

12. Additional remarks, if any, on any item considered relevant and important by the candidate but not included elsewhere.

13. PRESENT POSITION :

(a) Name of the institution or \_\_\_\_\_  
organization where working \_\_\_\_\_

(b) Designation : \_\_\_\_\_

(c) Nature of appointment : \_\_\_\_\_  
(Temporary / Permanent / Part-time/ Full-time)

(d) Date of appointment : \_\_\_\_\_

(e) Date of Confirmation : \_\_\_\_\_

(f) Salary (Attach last pay certificate, if any)

Present Salary Scale/Pay Band with AGP :

Present Basic Salary Rs. \_\_\_\_\_ Grade : - Rs. \_\_\_\_\_

Allowance Rs. \_\_\_\_\_ plus \_\_\_\_\_

\_\_\_\_\_

Admissible Allowances

\_\_\_\_\_

Total emoluments Rs. \_\_\_\_\_ allowances Rs. \_\_\_\_\_

(g) Date of next increment and amount of increment : Date of increment \_\_\_\_\_ and amount of increment of Rs. \_\_\_\_\_

14. Name and address of two persons other than relatives, to whom reference can be made about work and character of the applicant (enclosed copies of certificate from them. One of the certificates should be from the last employer and if not employed from the Head of the Institution from where the candidate has passed the last examination).

Name	Full address
1)	

2)	

15. Date when you can join, if selected : \_\_\_\_\_

16. Registration No. given by the Employment exchange, if registered with them \_\_\_\_\_

17. Have you any relative/s employed at the University or any of the Institutions concerned with University, if so give name of relative, name of the Institution/Department where he/she is working

\_\_\_\_\_

18. Particulars of testimonials enclosed :

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

(d) \_\_\_\_\_

(e) \_\_\_\_\_

(f) \_\_\_\_\_

(g) \_\_\_\_\_

I hereby confirm that all the information given in the application is correct :

Date :

Place :

\_\_\_\_\_  
Signature of the applicant  
(Name : \_\_\_\_\_ )

Application No. :  
Application Date :  
Time :

## DECLARATION

FORM – A (Sec Rule 4)

Shri/Smt./Kum \_\_\_\_\_

Son/daughter/wife of Shri. \_\_\_\_\_

aged \_\_\_\_ years, resident of \_\_\_\_\_

District \_\_\_\_\_ City \_\_\_\_\_

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 No. of children born after 28 March – 2005 is \_\_\_\_\_

**Date of Birth of children who born after 28 March – 2005**

3) I am aware that, if any total No. of living children are more than two due to the children born after 28 March – 2006, I am liable to be disqualified for the same post.

Place :

Date :

( Signature )

Signature of Applicant