



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

1, Nathibai Thackersey Road, Mumbai - 400 020.

APPLI RINCIPAL, ASSOCIA		OR EMPLOYMI ESSOR, ASSISTA			raff)	
ST APPLIED FOR:						
Details of Demand Dra						
<ol> <li>Name in full Mr./ (IN BLOCK LET</li> <li>Postal Address in</li> </ol>	Mrs./Miss _ TERS)	(Surname)	(First Name)	(Fa	ther's / Husl	band's Nam
3. Telephone No. (if (Office):	•	(Resi	.) :			
Mobile No.:		Email Id : _				
4. Personal Details:						
Age Date of Birth	Married / Single	Number & age of Children, if any	Nationalit	belon	Specify the c ging to SC/S with suppo certificat	ST/DT-NT ort of caste
5. Language known	(Please give	details and ✓ in a	ppropriate c	olumns)		
Mother-tongue:				Read	Write	Speak
Other languages	1.					
	2.					

Examination Class Percer passed		Percent	tage Year of passing		Name of Boar University	th w	/ Medium through which studied		Subject/s of Specializatio	
. Teaching E	xperienc									
Name of Inst	itution	time	part part	n (if full time or	Subject taught specifying level (i.e. Jr. College/			Peri	od	
Traine of first			ng, mention of ne be made)		Graduate/Post Graduate level etc.)		Fr	om	То	
Any other Ex								Peri	od	
Name of Org	ganizatio	on	Desig	gnation	Nature of '	Work 	Fr	rom	То	
		e title of	Thes	sis/Dissert	ation approved/su	bmitted f	or M.Ph	il., Ph.	D., etc.	
name of the Guide  Title of Thesis/Dissertation		Name of the Guide		f the Guide	Year of appro		/al/sub	mission		

10.			ist is long same be append	ed (other than research undertaken durin ded)
l 1		olications (if list is long s	came be appended)	
		(a) Articles:	anic oc appended)	
	(	(b) Research Papers:		
	(	(c) Books etc. :		
12.		ditional remarks, if any, included elsewhere.	on any item considered re	elevant and important by the candidate by
13.	PRI	ESENT POSITION :		
	(a)			
	(b)	Designation :		
	(c)	Nature of appointment	:	
		(Temporary / Permaner	nt / Part-time/ Full-time)	
	(d)	Date of appointment : _		
	(e)	Date of Confirmation :		
	(f)	Salary (Attach last pay Present Salary Scale/Pa	•	
		Present Basic Salary	Rs	Grade : - Rs
		Allowance	Rs	plus
				Admissible Allowances
		Total emoluments	Rs	allowances Rs
	(g)		t and amount of increment Rs.	nt: Date of increment an

	Name	Full address
	1)	
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	2)	
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5. l	Date when you can join, if selected:	
6. I	Registration No. given by the Employmen	t exchange, if registered with them
7. l		University or any of the Institutions concerns
7. ] I		University or any of the Institutions concernent and of the Institution/Department where he
7. ] !	University, if so give name of relative,	
7. ] ! -	University, if so give name of relative, working	name of the Institution/Department where he
7. 1 1  8. 1	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. ]  1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. 1  8. 1  8. 1  b) _	University, if so give name of relative, working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. ]  1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. I  1. (1) (1) (2) (3) (4) (4) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. I  8. I  8. I  b) _  c) _  f) _  f) _	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. ]  8. ]  8. ]  b) _  d) _  e) _  f) _  g) _	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. ]  8. ]  8. ]  b) _  d) _  e) _  f) _  g) _	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he
7. ]  8. ]  8. ]  b) _  d) _  e) _  f) _  g) _	University, if so give name of relative, a working  Particulars of testimonials enclosed:	name of the Institution/Department where he

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

#### **DECLARATION**

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 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 Advt. No. 2/2016 on the website of the University <a href="https://www.sndt.ac.in">www.sndt.ac.in</a>.

Place : Mumbai Date :	
	Name & Signature of the Candidate:
Recommendation o	f employer
To, The Registrar, S.N.D.T. Women's University, Mumbai -20	
Sir,	
I am forwarding an application of Shri./Smt	working
in as	as a duly recommended.
	Yours faithfully,
	(Name & Signature of Employer) Seal :
Place : Mumbai	
Date:	

### **DECLARATION OF SMALL FAMILY**

#### FORM - 'A'

## (See Rule - 4)

1. Sn	ri./Smt./Kum son/					
da	ughter/wife of Shri.					
ag	ed years, resident of					
	District					
:	City : do hereby declared 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 28th March, 2005 is (Mention					
	dates of birth, if any) Date of Birth of children who born after 28th March, 2005.					
3)	I am aware that, if any total No. of living children are more than two due to the					
	children born after 28th March, 2006, I am liable to be disqualified for the same					
	post.					
Place :	<del></del>					
Date :						
	Name & Signature of the candidate :					

# FORMAT FOR NO OBJECTION CERTIFICATE (To be typed on Employers letterhead)

#### TO WHOMSOEVER IT MAY CONCERN

Certified	that	Shri/Smt./Kum.			
working as	(Design	nation)		is a confirmed empl	oyee of this
(Organizatio	on nam	ne)		·	This office
has NO OBJ	ECTIO	<b>N</b> in his / her applying f	or the post of	,	at
the S.N.D.T.	Wome	n's University, Mumbai ii	n response to	the advertisement in	newspaper
Indian Expr	ess/ Lo	oksatta dated		_ and to appear for i	nterview (i
called). The	re is n	o vigilance/disciplinary	case either p	ending or contempla	ited against
him/her.					
			Signature of I Forwarding A	Head of the Departme Authority.	ent/
Place :		_			
Date :		_			