



SHREEMATI NATHIBAI DAMODAR THACKERSEY WOMEN'S UNIVERSITY,

1, Nathibai Thackersey Road, Mumbai - 400 020.

ADVERTISEMENT NO. 01 / 2016

APPLICATION FOR EMPLOYMENT (TEACHING STAFF) (UNIVERSITY LIBRARIAN, PROFESSOR & RESEARCH OFFICER)									
POST A	APPLI	ED FOR:_							
				me of Bank:					
1.	Name (IN B)	in full Mr./I LOCK LET	Mrs./Miss _ ΓERS)	(Surname)	(First Nam	e)	(Fat	ther's / Husl	oand's Name
2.									
					PI	N C(ODE NO	O	
3.	Telepl	none No. (if	any):						
	(Offic	e):		(Resi	.):				
	Mobil	e No.:		Email Id : _					
4.	Person	nal Details :							
	Age	Date of Birth	Married / Single	Number & age of Children, if any	National	ity	belong	pecify the c ging to SC/S with suppo certificat	ST/DT-NT ort of caste
5.	Langu	age known	(Please give	details and 🗸 in a	ppropriate	colu	ımns)		
	Mothe	er-tongue :				F	Read	Write	Speak
	Other	languages	1.						
			2.						

3.

6. Education qualification Examination passed		Percent	Percentage Year of passing		Name of Boar University	thro wh	Medium through which studied		Subject/s of Specialization	
7. Teaching E		Desig		(if full ime or	Subject taught s			Peri	od	
visit			ng, mention of ne be made)		Graduate/Post Graduate level etc.)		Fro	om	То	
Any other E			Dagig		Natura of I	Mode		Peri	od	
Name of Organization		11	Designation		Nature of Work		Fre	om	То	
. Please give to name of the		title of	Thesi	s/Disserta	ation approved/su	bmitted for	M.Phi	il., Ph.	D., etc. a	
Title of Thes	is/Dissert	tation		Name of	f the Guide	Year of a	approv	al/sub	mission	

	Post-Graduate Studies) (if I		ed (other than research undertaken aded)	aurin
_				
-				
– 11. P	Publications (if list is long	same be appended)		
	(a) Articles:			
	(b) Research Papers:			
	(c) Books etc. :			
	Additional remarks, if any, ot included elsewhere.	on any item considered	relevant and important by the candic	date b
13. P	RESENT POSITION :			
(a	a) Name of the institution	n or		
	organization where wo	orking		
(1	b) Designation:			
((nt / Part-time/ Full-time)		
((•			
(6				
(1		_		
	Present Salary Scale/P	•	Crada e Da	
	Present Basic Salary	Rs		
	Allowance			
	Allowance			_P143
	Allowance		Admissible Allowances	_pras
	Allowance Total emoluments	Rs	Admissible Allowances	
(5	Total emoluments	Rs	Admissible Allowances	

Name	Full address
1)	
2)	
-,	
working	
Particulars of testimonials enclosed :	
֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	Date when you can join, if selected: Registration No. given by the Employment exc Have you any relative/s employed at the Uni University, if so give name of relative, nam working Particulars of testimonials enclosed:

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. 3/2014 on the website of the University www.sndt.ac.in.

Place : Mumbai Date :	
	Name & Signature of the Candidate:
Recommendation o	
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. Shi	ri./Smt./Kum.						son/
daı	ughter/wife	of	Shri.				
ag	ed	years,	resident	of			
							_District
:	Cit	y:		_ do hereby o	declared as foll	ows:	
1)	That I have	filled m	ıy applica	ation for the	e Post of		
2)	I have	(Nı	ımber) liv	ving children	as on today _		Out of
	which No. of	childrer	born aft	ter 28 th Mar	ch, 2005 is		(Mention
	dates of birth,	if any) I	Date of Bir	rth of childre	n who born aft	er 28th Marc	ch, 2005.
3)	I am aware that, if any total No. of living children are more than two due to						
	children born	after 28	8 th March,	2006, I am l	iable to be disc	qualified for	the same
	post.						
Place :							
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 (Designation)	is a confirmed employee of this
(Organization name)	This office
has NO OBJECTION in his / her applying f	for the post of at
the S.N.D.T. Women's University, Mumbai is	n response to the advertisement in newspaper
Indian Express/ Loksatta dated	and to appear for interview (if
called). There is no vigilance/disciplinary	case either pending or contemplated against
him/her.	
	Signature of Head of the Department/ Forwarding Authority.
Place :	
Date :	