

SNDT Women's University

1, Nathibai Thackersey Road,

Mumbai - 400 020

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Fax : +91 22 2201 8226



श्रीमती ना. दा. ठाकरसी विद्यापीठ

१, नाथीबाई ठाकरसी मार्ग

मुंबई ४०० ०२०

Telegram: UNIWOMEN

Website : sndt.ac.in

Advertisement No. 01 of 2026 dated 18.02.2026

(Please submit seven sets with necessary enclosures)

To,
The Registrar,
SNDT Women's University,
Mumbai - 400 020.

Affix recent
passport size
photograph
with self
attestation

Sub : Application for the post of _____

Respected Sir,

I hereby submit my application for the post of _____
(write name of the post in handwritten) with the following details :

APPLICATION FORM

(Please read the general instructions, Terms & conditions before filling the form)

1. Personal Details (In Capital Letters)							Enclosure No.
Full Name (Surname First)							
Date of Birth (DD/MM/YY)	DD	MM	YY	Age (In years) as on 18.02.2026 _____	MM	YY	
Gender (Male/Female)				Marital Status			
Nationality				Religion			
Caste with Caste (SC/ST/VJ-A/NT(B/C/D)/ OBC/OPEN/PH. etc.)							
Particulars of Physical Disability, if Applicable							

5. Present Position						Enclosure No.
Designation	University/ Institution	From Date	Basic Pay	Pay Scale/ Pay Band	Gross Pay / Total Salary p.m.	

6. Teaching Experience as an approved full - time teacher								Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University Institution	Period		Teaching Experience			
			From	To	Y	M	D	

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

Special contribution, if any :

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

9. Publications :							Enclosure No.
Number of Books Published :		[] Own	[] Joint Authorship				
Number of Books Edited :		[] Own	[] Joint Authorship				
Number of Papers Published :		[] Own	[] Joint Authorship				
Own				Joint Authorship			
International Journals	National Journals	International Conferences/ Seminars / Symposium	National Conferences /Seminars / Symposium	International Journals	International Conferences/ Seminars / Symposium	National Conferences /Seminars / Symposium	International Conferences/ Seminars / Symposium
[]	[]	[]	[]	[]	[]	[]	[]
NOTE : Give the details of Publications on separate sheet.							

10. Administrative Experience :								Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University Institution	Period		Administrative Experience			
			From	To	Y	M	D	

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

Special contribution, if any :

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

15. Academic Distinctions (Award/ Scholarship/ Rank, etc) : <i>(Enclosure additional sheet, if required, in the same format)</i>		Enclosure No.
(I)		
(II)		
(III)		
(IV)		
(V)		
(VI)		
(VII)		
(VIII)		
(IX)		
(X)		

16. Membership / Fellowship of learned Accredited Academic Bodies : <i>(Enclosure additional sheet, if required, in the same format)</i>		Enclosure No.
(i)		
(ii)		
(iii)		
(iv)		
(v)		
(vi)		

17. Competence in Computer Applications :		Enclosure No.
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<i>(Enclose additional sheet, if required, in the same format)</i>		

DECLARATION - I

I, hereby, declare that, all information submitted in this application and 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 **University Advertisement No. 01 of 2026 dated 18.02.2026** on the website of the University.

DATE :

PLACE :

(Signature of Applicant)

(Government of Maharashtra, Gazettee, April, 28, 2005)

Form - 'A'
(See Rule - 4)

I, Dr./Shri./Mrs./Ms. _____,
son/Doughter/Husband/Wife of Dr./Shri. _____
aged _____ years resident at _____

do hereby declare as follows :-

1. That I have filled my application for the post of _____ as per the University advertisement no. 01 of 2026 dated 18.02.2026 I have _____ (____ Number) living children as on today, out of which number of children both after 28th March, 2005 is/are _____ (Mention dates of Birth, if any)
2. I am aware that if total number 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.

DATE :

PLACE :

(Signature of Applicant)



ENDORSEMENT BY THE EMPLOYER
(For in-service conditions only)

To be signed and forwarded by the present employer

Forwarded to :

The Registrar,
SNDT Women's University,
Mumbai - 400 020.

The applicant Dr./Shri./Mrs./Ms. _____,
who has submitted this application for the post of _____
as per the University advertisement no. 01 of 2026 dated 18.02.2026 in the SNDT
Women's University, Mumbai has been working in _____
_____, on the post of _____ in a
temporary, permanent capacity with effect from _____ in the scale of Pay/
Pay Band of Rs. _____ with Grade Pay of Rs. _____. His/her
next increment is due on _____. Further it is certified that no disciplinary/
vigilance case has ever been held or contemplated or is pending against the said
applicant.

There are **No Objection** for his/her application being considered by the SNDT Women's
University, Mumbai.

Signature of the forwarding authority

Name : _____

Designation : _____

Place : _____

Date : _____

OFFICE SEAL



SNDT WOMEN'S UNIVERSITY, MUMBAI

Particulars of applicant for the post of _____

Post Category :

No. of Post : **01 (ONE)**

Adv. No. 01 of 2026 - dated 18.02.2026

Name & Correspondence Address of the Applicant with Contact No. & Email ID	Date of Birth	Academic Qualifications				Experience (Years/Months/Days)					No. of execute major Research/ Consultancy/ Industrial Projects	Evidence regarding knowledge in the field of intellectual Property Rights	Publications
		Degree Awarded	Year of Passing	Percentage/ CGPA	Div. / Grade	Teaching	Research/ Industrial/ Professional / Entrepreneurial	Administrative	Establishment of an Enterprise/ Industry	Establishing Collaborations/ Linkages at National / International level			
1	2	3	4	5	6	7	8	9	10	11	12	13	14
	AGE as on 18.02.26												International : Own : _____ Joint : _____ Total : _____ National : Own : _____ Joint : _____ Total : _____

I hereby declare that all the entries made by me are true to the best of my knowledge and belief. If anything is found false at any stage, my candidature for the Post of _____ may be cancelled without assigning any reason there for.

Date : _____

Signature of Applicant :

Place : _____

Name of Applicant : _____

