Dr. Babasaheb Ambedkar Open University, Ahmedabad

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Name of the post applied for :- _____

(Note: Use a separate application form for each post. Application forms must be filled up by own handwriting. Filled up applications must be sent by Regd. A.D. only)

1. Name of applicant _____

         (Surname)   (Name)   (Father's/Husband's Name)

2. Address:-

   (1) For correspondence: (2) Permanent Address

       _____   _____

       _____   _____

       _____   _____

   PIN:- _____ Ph: _____   PIN:- _____ Ph: _____

3. Mobile Number: _____

4. E-mail: _____

5. Mother tongue: _____ 6. Nationality: _____

7. Date of birth: _____

8. Category:- (Attach recognized certificate for the reserved candidates)

   SC [   ]   ST [   ]   SEBC [   ]   Handicapped [   ]   Others [   ]

9. Proficiency in language:

Language	Writing	Reading	Speaking
(1) Gujarati	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____
(4) _____	_____	_____	_____

10.   Educational Qualifications:- (from S.S.C.)

Examination	Board / University	Year of passing	Marks/Grade, Percentage	Main subject	Remarks
S.S.C.					
H.S.C.					
Graduation: 1st Year 2nd Year 3rd Year					
Post-Graduation 1st Year 2nd Year					

11.   Other educational achievements: (Award, Prize, Medal, etc.)

12.   Proficiency in Computer (Give details)

13.   Details of UGC/CSIR or similarly recognized / NET/ SLET exam, if passed.

Year of examination passed: _____   Regn. No. _____

14.   Details of experience:

Name of the Institution	Designation	Pay scale and basic pay as on application date, Grade Pay	Duration	Remarks

15. Educational Experience:
   (a) Graduation Level   -   Year _____

   (b) Post-graduation Level   -   Year _____

   (c) Research/Extension   -   Year _____

   (d) M.Phil./Ph.D. guidance   -   Year _____

   (Give details in a separate sheet)

16. Details of Publication and Research work:

S.No.	Title	Year of publication	Publisher	ISBN / ISSN No.	Remarks

(Please use separate sheet if needed)

17. Details of Seminar / Workshop / Orientation / Refresher Course:

S.No.	Name of Institution	Programme	Duration	Whether paper submitted	Category State/ National/ International

(Please use separate sheet if needed)

18. Please give name, address and contact number of two persons for reference.

   (1) _____   (2) _____

   _____   _____

   _____   _____

   _____   _____

19.   Details of attachments: (Attach self-attested Xerox copies)

(1)   Proof of Date of Birth.

(2)   Proofs of Educational qualifications

(3)   Experience certificates – If your teaching experience is in a Self Finance Institution, please submit copy of approval of your appointment / profile of the concerned University.

(4)   NET / SLET examination pass certificate

(5)   Details of guidance to M.Phil./Ph.D. category students.

(6)   M.Phil. / Ph.D., Thesis, Titles of Publications.

(7)   Details of Seminars / Workshops / Orientation programme / Refresher Course.

(8)   Others.

20.   Other information.

CERTIFICATE

I hereby declare that the information given in the application is true according to my knowledge and belief. I have not given any wrong or incomplete information. I know that in case of any false information is found on my part after my appointment, my service is liable to be terminated without any notice. I have read the instructions given along with the application form and understood the same and I am abide by it.

Date _____   _____

Place _____   (Signature of the applicant)

(For use of Applicants in Employment)

Forwarded with the remarks that the above statements made by the applicant are correct to the best of my knowledge and belief, and this institution / organization has no objection to the candidature of the applicant being considered for the post applied for.

Date: _____   (Signature) _____
Place: _____   Head of the Institution

Designation _____
Address   _____
               _____
               _____
Mobile No. _____