

Bihar Animal Sciences University (BASU), Patna 800014

APPLICATION FORM FOR ENGAGEMENT OF LANGUAGE LAB TRAINER AS GUEST FACULTY.

Paste your recent passport size photograph here

1. Name of the post (discipline) applied for.....

2. Personal Details:

a)	Name (In capital letters)	First Name			Middle Name	Surname
b)	Date of Birth	Day	Month	Year	Age as on 12/01/2019	
					Age	Month
c)	Father's Name :-					
d)	Mother's Name :-					
e)	Nationality :-					
f)	Gender (Male/Female) :-					
	GEN/SC/EBC/BC, Other ,If other categories give details					
h)	Marital Status (Married/Unmarried)					
i)	If Physically challenged indicate the relevant Particulars	If applicable write "Yes"			Percentage of Disability	
j)	Permanent Address with Pin Code: -					
Email :-						
Mobile :-						
Landline (STD code) :-						
k)	Present address with Pin Code for Correspondence: -					
Email :-						
Mobile :-						
Landline (STD code) :-						

3. Educational qualification (attach additional pages if required) and one set of self-attested photocopies of certificate(s).

Exam	Degree awarded	Name of the Board/University	Month & year of passing	Division	% of marks/ OGPA	Subjects
10 th class/equivalent						
12 th class/equivalent						
Bachelor Degree						
Master Degree						
M.Phil. Equivalent Degree						

Indicate whether Ph.D. degree has been awarded (Yes/No/):					
If yes please submit the following	Title and Subject of the Thesis	Date of Registration	Date of Submission	Date of Notification	S. I. No. of Proof attached
Any other exam passed NET/ UGC/CSI (SLLET/ SET etc.)	Subject			Roll No.	Year

4. Chronological List of experience (including current position/employment) use separate sheet if needed. Please enclosed self-attested copies of certificate/proof in support of employment.

Designation	Name of employment (Permanent/temporary /contract/other (specify)	Period of Employment		No. of Years/Months (as on day of advt.)	Name of work/Duties (attach separate sheet, if needed)	Salary P.M. (Rs.)
		From	To			

5. Specify the nature of experience

Teaching		Subject/No. of Years	No. of Months	Sl. No. of proof attached
i)	Under Graduate Level			
ii)	Graduate Level			
iii)	Post Graduate Level			
	a) Research			
	b) Extension/Training			
	c) Other experience, if any			

6. Publications in last five years (Mention here only numbers. The details of copies of reprint to be enclosed), Separate Sheet can be annexed

Publication	Title	Published	ISBN/ISSN No. if any	Accepted for publication
Chapter in Books				
Research Papers in peer review journal				
National journal				
International journal				
Conference/Seminar proceedings				
Other publications/patents (Specify)				

7. Seminar/Conferences attended etc. (Attached copies of certificate/proof)

Place	Period/No. of days	Title of Workshop/seminar	Organised By
1. 2. 3. 4. Separate Sheet can be annexed			

8. Training attended (Attached copies of certificate/proof)

Place	Place	Period/No. of days	Organised By
1. 2. 3. 4. Separate Sheet can be annexed			

Declaration

ISon/Daughter ofhereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or even after the selection my candidature/ appointment may stand cancelled.

Signature of the Applicant

Name (in block letters)

Date:-

(Application not signed by the candidate is liable to be rejected.)

