

बिहार पशु विज्ञान विश्वविद्यालय

BIHAR ANIMAL SCIENCES UNIVERSITY, PATNA-800014

(Established in 2016 under Bihar Animal Science University Act-2016)

APPLICATION FORM

he general instructions care	stully given on the website before the	nting the application form				
:		Please Affix self-attested				
:						
:	•••••	photograph				
:						
	Dated					
	Name and Branch of the issuing Bank					
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	ins pages (Total fill up score card as permany of experience (2/	Name and Branch of				



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	Full name of the post applied for			
2.	Name in full (In Block Letters)	Dr./Mr./Mrs./I	Ms.	
3.	Father's Name	-		
4.	Mother's Name			**
5.	i) Marital Status	2 Vice	Yes / No	
	ii) If Yes, mention Spouse Name			
6.	Gender (Male/Female)	-		
7.	Date of Birth			
8.	Age (As on closing date)	Years	Months	
9.	Place of Birth			
10.	Nationality			
11.	Mother Tongue			·
12.	Telephone No. (With STD Code)/ Mobile No.			
13.	E-mail Address			
	Repeat E-mail Address			
14.	Aadhaar Number			
15.	Present Mailing Address with Pin Code			



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10.	Peri	nane	ent Home Address with Pin Code		
17.	Stat	e of	permanent domicile		
18.	150	ou a gnat	are employed, mention your present ion		
19.	(offi	ce, in	d Designation of your present employer estitution) nt/ Contract/ temporary		
20.	I.	i)	Scale of pay + grade pay		
		ii)	Level in 7th CPC		
	II.	Pre	esent basic pay		
	III.	Otl	her admissible allowances		
23.		selec uired	ted, please state the joining time		
24.	peri	od	tion for seeking extension in joining		
25.	min	imuı	ted, are you prepared to accept the m initial basic pay offered. If not, state st initial acceptable basic pay.		



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Academic Qualifications

Matriculation	Senior Secondary (10+2)/ Intermediate	Graduation	Post- Graduation (M.Sc. / M.V.Sc.)	Doctorate (Ph. D.)
				
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		Secondary (10+2)/	Secondary (10+2)/	Secondary Graduation (10+2) / Intermediate (M.Sc. /

(Attach self-certified copies of the Detailed Marks Sheets or Transcripts / degrees certificates of all the examinations passed)

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5. Sign

27. Details of the research work done in fulfilment of the requirements for Master's & Ph.D. degrees

Name of the degree	M.Sc. / M.V. Sc.	Ph. D.
Institution		
Partly or wholly research		
Name of guide or supervisor		
Field of Research		
Title of thesis		
Period spent		
Date of joining		
Date of completion		
No. of publications based on Research during Master's & Ph.D. degrees		
*		

28. Details of other research work which was not in fulfilment of the requirements of a degree

(Attach separate sheet, if needed)

Field of Research						
Institution						_
Period of Research	From	То	From	To	From	То
No. of publications based on Research						

you.



2.. Details of NET examination, if qualified

Subject	
Date of appearing	
Date of passing	333355 S
Date of issue of certificate	
Conducted by ICAR / ASRB / UGC / CSIR /	
Any other (Specify)	

30. Membership in Veterinary Council (Attach Evidence) – only for candidates with B.V.Sc. & A.H. degree

State Cour Registered	ncil in	which	Registration No.		Valid up to		
2108				Day	Month	Year	
			* N				

31. Full list of publications (attach separate sheet, if needed)

Sr. No.	Title of Publication	Nature of Publication (original research paper, review article, authored or edited reference or text books, with ISBN/ISSN number, practical manuals, clinical case reports, popular articles, research notes, short communications)	Name of the journal, magazine and publisher	NAAS Rating as on the last date of submission of application form	Have you attached reprint (If reprints / proof are not attached, no marks for publication will be awarded)

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52. Employment Record

Designation of the posts held	Period (and yea shoul give	r both ld be	Duration		Pay drawn (Basic Pay + Grade Pay + allowances	Full address of the office/firm or institution	Reason for leaving the post	
	From	То	Years	Months	Days	except HRA and CCA)		

33.1 Teaching (As on the last date of submission of application and period spent on study for Master's/Ph.D. degree should not be included)

Name of institution / Department (whether Govt./Govt. aided / recognized)	Designation	Nature of Appointment (Ad hoc / Temporary / Permanent)	2027 - 122000	od of king Date of leaving	Reasons for leaving	Nature of work/duty	No. of courses designed / new courses added or revised	No. of designed innovative teaching methods / development of teaching aids / e- courses / manual





5. 4 Research (As on the last date of submission of application and period spent on study for Master's/Ph.D. degree should not be included)

Name o Research Project	f	PI / Co- PI	Type of funding agency	Date of commencement of project	Date of completion of project	Period of Association in Research Project		Date of submission of Project
						Years	Months	report
				8	1			
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33.3 Extension (As on the last date of submission of application and period spent on study for Master's/Ph.D. degree should not be included)

i)	Involvement in technology application programme / organizing activities related to technology assessments / refinement
ii)	Extent of adoption of technology in adopted areas (%)
iii)	Participatory Rural Appraisal (PRA) and participatory Technology Development Research (No. of reports)
iv)	Innovative extension methodologies development / management cases / documentation success stories
v)	New methodology developed / innovation introduced for improvement in extension / technology adoption (No.)
vi)	Extension approaches
vii)	Electronic connectivity OR Organization (Farmers meeting / demonstration / exhibition / TV & Radio Talks

34. Academic Awards/Honours /Recognitions

(List awards including, National awards instituted by Government of India, University medals (Gold Medal/first position), fellowships of National academies, Novel Technology Developed (Patent granted/ Protype / Genetic Stock/ Variety / Process / Concept/ Methodology/ New Innovation/ genetic pool identified etc.) /Technology commercialized, National, state awards in NCC/NSS/Dramatics and Literary/Sports)

Sr. No.	Name of Award/Honour	Conferred by (Name of Organization)	Year of Award
-			





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	b)		of Kisan Mela	:					
		Organization		:					
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		Organization	oi silds	•					
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	b)	Name:							
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(vii)		 .		(viii)				
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IDENTITY CERTIFICATE

Certificate to be signed by any of the following:

- i. Gazetted Officer of Central or State Government;
- ii. Member of Parliament or State Legislature;
- iii. Sub-Divisional Magistrate/Officer;
- iv. Tehsildar or Naib /Deputy Tehsildars authorized to exercise magisterial powers;
- v. Principals and Headmasters of all recognized institutions;
- vi. Head of University/ Departments; and
- vii. Block Development Officer.

	know Dr./Shri/Smt./Kumari	for the last
	months, and that to the best of my	- Contractor State State State Contractor Contractor
	Signature	_
(Name in block letters)		
Place:	Designation and address	
Date:		



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DECLARATION

I certify that the above information is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time, it is found that any information is false / concealed / distorted then, my appointment shall be liable to summarily termination without any notice / compensation and criminal case may be initiated against me under the relevant provision of Indian Panel Code and other laws as applicable.

Further, I have gone through the general instructions and conditions mentioned in the advertisement and website of the university before filling the application.

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	Thumb impression of		
(Lett	hand for male and rig	nt nand for female)	
		Signatura	of Candidata
		Signature	of Candidate



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Place:

Dated:

VERIFICATION OF THE ANTECEDENTS OF CANDIDATE BY THE EMPLOYER

(The information is to be furnished by the Employer in respect of the in-service candidate for the last 10 years and in case the service period is less than 10 years then from the date of joining)

Year	Overall performance	Report about integrity	Report about work and conduct	Punishment awarded, if any	Whether any disciplinary / legal / Vigilance proceedings are pending against the official.
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es he/she t	fulfil the prescribed q	ualifications/exn	erience required	for the post?	5050
	ualifications (Yes/No	_	1	pob	
-	xperience (Yes/No)	,			
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Full Signature

SUMMARY OF QUALIFICATIONS - FORM - 2A (10 copies)

Scale of Pay

Name of post_

Grade Pay

Particulars		Academ	Academic qualifications				Trainings/short term courses attended	m courses	attended
a) <i>Name</i>	Examination/Degree	Month and year	University/ Board	Percentage	Division Grade Position	Sr.	Particulars	Period	Host institution
b) Date of birth		passing							
c) Address									
d) E-mail address									
e) Contact Tel. Number									
					8				
Major field			Minor field			•			
M.V.Sc. /M.Sc.									

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SUMMARY OF EXPERIENCE - FORM - 2B (10 copies)

Grade Pay	
Scale of Pay	
Name of post	

EXPERIENCE AFTER POST GRADUATION

Post and	Nature	Teaching/	Institution	From	To	Total years	Number of Publications	Any other information
Pay scale+	Permanent/	Research/					This list has to match with the	/involvement in institutional
Grade Pay	Temporary/	Extension		•			number publications attached with	h support activities
	Adhoc	Field*					application form	
							Original Research	
							Papers	
							8	
							Magazine articles	
	ėso						Chapter in Books	
8							Popular articles	
			Section of the sectio					
8	2						Reviews	
Present Post	1000000							
i) Basic Pay+ G.P.	G.P.							
_								
ii) Total emoluments	luments							
4.							Full Signature	
*Here also st	*Here also specify nature of job(s)	op(s)				3.		

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