



NAGALAND UNIVERSITY

(A Central University Estd. By the Act of Parliament No.35 of 1989)

Headquarters : Lumami - 798627

APPLICATION FORM FOR NON-TEACHING POSTS

**Affix
Latest Colour
Passport
Photograph**

APPLICATION FOR THE POST OF _____

Advertisement No and Date: _____

Post Sl.No. and Scale of Pay: _____

1. Full Name in Block Letters: _____

2. Father's/Husband Name: _____

3. Mother's Name: _____

4. Date of Birth (*copies of evidence to be enclosed*): _____

5. Age as on (01.01.2018): _____ Years _____ Months _____ Days

6. Sex Male/Female: _____

7. Nationality: _____ 8. Religion _____

9. Do you belong to: **S.C** [] **S.T** [] **O.B.C** [] **P.W.D** []
(*Copies of evidence to be enclosed*)

10. Permanent Address (in full) with nearest Police station: _____

11. Present Postal Address (in full) for correspondence: _____

12. Telephone/Mobile No : _____

13. E-mail address: _____

14. Details of Examination passed from Matriculation/School leaving certificate onwards
(To be supported with true copies duly attested).

Name of the School with Board/Council, College and University	Examination passed	Class or Division	Marks obtained in percentage	Year	Subject of studies

15. Technical qualification if any (Enclose true copies duly attested).

Name of the School with Board/Council, College and University	Examination passed	Class or Division	Marks obtained in percentage	Year	Subject of studies

16. Details of Present & Previous Employment (To be supported with certificate from the employer).

Give particulars in descending order starting with the present post:

Employer	Status of Institute/University Central / State. Govt. Quasi Govt./ Autonomous/ Private.	Post held	Scale of Pay	Period of Employment			Nature of duties/ work
				From	To	Length of service	

17. Give name of two persons for (reference), not related to you, with full address:

Name:

Name:

Occupation:

Occupation:

Address:

Address:

M. No:

M. No:

E-mail:

E-mail:

19.

Are you married? If so, have you any children? Give details.

20.

Particulars of remittance:

Amount Rs. _____ (Rupees _____) only

Date of deposit _____ Name of the Bank with address _____

_____ Branch Code No. _____

21. List of Enclosures attached:

(a) _____

(b) _____

(c) _____

(d) _____

(e) _____

(f) _____

(g) _____

(h) _____

(i) _____

(j) _____

(k) _____

I hereby declare that the entries made in this form as above is true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/services are liable to be terminated without any notice.

Dated: _____

Signature of the applicant

Place: _____

Name: _____

Note:

Where space provided in the form is found to be inadequate, annexure may be given in plain paper quoting the numbers under which additional information is supplied.

TO BE FILLED BY THE EMPLOYER FOR CANDIDATE ALREADY IN SERVICE

1. Certified that Dr./Mr/Mrs/Miss _____ is a permanent/
temporary employee who has been serving in this organization as _____
with effect from _____ to _____.
2. It is also certified that no **disciplinary/departmental/vigilance** enquiry is either pending or
contemplated against _____ and that he/she is not undergoing
any penalty.
3. His/Her integrity is certified
4. The institution/organization has, therefore, no objection to his/her candidature being
considered for the post applied for.

Date: _____

Signature of the Head of the Institution
(With Seal)

Place: _____

Name: _____

Designation: _____

Note:

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paper quoting the numbers under which additional information is supplied.