

**Application Form for the position of [Post Name] : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Personal Information** | | | | | | | | | | | | |
| Name in full  (in block letters): | |  | | | | | | | | | *Affix Recent*  *Photograph* | |
| Father’s Name: | |  | | | | | | | | |
| Nationality: | |  | | | | | | | | |
| Religion: | |  | | | | | | | | |
| Gender: | | Male Female | | | | | | | | |
| Category: | | Gen SC ST OBC EWS PH | | | | | | | | | | |
| Date of Birth  (as per SSLC/ HSC/ SSC/ Matric Certificate) | | Date Month Year | | | | | | | | | | |
| Address for Communication: | |  | | | | | | | | | | |
| City: | |  | | | | Pin code: | | |  | |
| State: | |  | | | | | | | | |
| Phone with STD code/ Mobile No.: | |  | | | | | | | | | | |
| E-mail Id: | |  | | | | | | | | | | |
| 1. **Academic Information** (commencing with the equivalent examination in chronological order) | | | | | | | | | | | | |
| Degree | Name of the Board/ University | | | | Year of Passing | | Subject/ Specialization | | | Percentage/ CGPA | | Class/ Division/  Grade |
|  |  | | | |  | |  | | |  | |  |
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|  |  | | | |  | |  | | |  | |  |
|  |  | | | |  | |  | | |  | |  |
| 1. **Work Experience** (starting from the present employment) | | | | | | | | | | | | |
| Name & Address of Institute of Employment | | | Position Held  (with period : from \_\_ to \_\_)  (Permanent / Temporary) | | | Salary & Grade *(annual)* | | | Nature of Duties / Work \* | | | |
|  | | |  | | |  | | |  | | | |
| 1. **Significant Achievements / Awards** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| 1. **Any other information** (in support of your candidature) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

***\*****Please be brief, if extra space needed use* ***Page 4***

|  |  |  |
| --- | --- | --- |
| 1. **References** | | |
| List two references (excluding relatives) having knowledge of your work performance, who might be contacted, if needed. | | |
| Name and Designation | Address | E-mail and Phone/ Mobile |
|  |  |  |
|  |  |  |

**DECLARATION**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that all the statements made in this application are true and complete to the best of my knowledge and belief and nothing has been concealed/ distorted. I am aware that, if at any time I am found to have concealed/ distorted any material/ information, my employment with AcSIR is liable to be summarily terminated without notice.

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Place: |  |

|  |  |
| --- | --- |
|  |  |
|  | Signature |

SPACE FOR ADDITIONAL INFORMATION

*(Please mention section, to which the information pertains)*