



Aliah University

Application Form

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PARTICULAR OF DEMAND DRAFT

Amount (Rs.):.....D.D. No.:.....Date of Issue:.....

Name of the Bank with Branch:.....

1. Post Applied forDept. :.....
2. Advertisement No. with date:.....
3. Name of the Applicant in full:.....
(BLOCK LETTERS) (First) (Second) (Last)
4. Contact details
(i) Address
(a) Permanent
.....
.....
(b) Address for Communication.....
.....
.....
(ii) Email:.....
(iii) Phone (Mobile):.....Resi/Office.....
5. Date of birth (DD/MM/YYYY)Age (as on 15.11.2017):.....
6. Nationality by Birth At Present.....
7. Sex (Please Tick) : Male / Female
8. Category
(Please Tick)

GEN	SC	ST	OBC-A	OBC-B	PD
9. Father's Name / Mother's Name
10. Applicant's mother Tongue.....
11. Other Languages the applicant can speak/write/read fluency (Strike off whichever is not relevant).....
.....

12. Academic Records

Examination/Degree	Board / Council/ University /Other Examination Body	Duration of the Course & Years of Complete	Division / Class with % of Marks	Subjects / Discipline *
10 th Standard				
12 th Standard				
Graduation (Honours/Major)				
M.A/M.Sc./ME/M.Tech (UGC/AICTE/NCTE/ Co A/PCI recognized) (In the subject as per advertisement)				
M. Phils (2 years Course)				
Ph. D (as per UGC new guideline)				
Any Other				
UGC NET/SET/GATE				
JRF/CSIR/AICTE/Institute Fellowship/Any other				

*State the name of the degree (such as BA/BSc./B.Tech, MA/MSc./ME/M.Tech etc), Honours/ Major subjects in case of graduation and subject/discipline and area of specialization in case of post-graduation and for higher degrees obtained.

13. Particulars of experience in reverse Chronological order (starting from present employment)

Name of the Institution	Position Held	Scale of Pay & Other Allowances	Duration		Nature of Work	Reason of leaving
			From (Date)	To (Date)		

14. Research Activity (Document to be Enclosed)

a) Prestigious Honours and Award received with name of awarding agency/government and year

(Should be recognized by the international agencies or the departments/agencies of national/state government; documents to be attached)

b) Post Doctoral Fellowship of at least 2 months duration received and availed of: (document to be attached)

Name of the Fellowship	Funding Agency/Institute	Host Institution	Period

c) Research projects carried out/ongoing funded by government funding, agencies/industries or organization of National and International repute (*State Whether Sole, Principal or Co-Investigator*) (document to be attached)

Title of the Project	Funding Agency / Institute	Period	Completed/ On-going	Amount

Use additional sheet if necessary

d) Number and details of Patents/Technology Transfer:.....

.....

(list details with year in an additional sheet; documents to be attached)

e) Number of Policy documents for Government Bodies at Central & State Level

(list details with years in an additional sheet; documents to be attached)

f) Training Courses/Workshop/Refresher Course attended/organized (documents to be attached)

Title of the Course	Nature of the Course (Workshop/Refresher Course/Others)	Sponsoring/Funding Agency	Duration of the Course (State also whether attended or organized)	Host/Organised

g) Number of Paper presented in conference/Seminar (by self or by co-authors)

- International
- National/State Level.....

(Note 1) List with title of the paper, year and host institution in an additional sheet, Participation certificates must be attached. Otherwise no credit shall be given to the numbers claimed above; 2) If a paper presented in a conference/seminar is published in the form of Proceedings or Edited Volume, it should be listed only under Publications.)

15. Publication (details of all publication should be listed in additional sheet with copies of first/Title page being attached; otherwise no credit shall be given to the numbers stated below)

Sl. No.	Title of Paper /Book	Name of the Journal	UGC Listed/ International	Volume and Year of Publication	Single Author/ Co-Author	Remarks

16. Name and Contact details two referees

Name	Profession/Position	Institutional Affiliation	Address and Contact

17. Additional Remarks, if any (such as member of the Editorial of reputed Journal), if any:

Declaration

I declare that the entries made in this form are true and correct to the best of my knowledge and belief.

Date:.....

Place:.....

Signature of the Applicant

Enclose the following with self-attested:

- 1) Photocopy of age proof vide Serial No: 5
- 2) Photocopy of Caste Certificate vide Serial No: 8
- 3) Photocopies of all testimonials vide Serial No: 12
- 4) Photocopies of Particulars of experience vide Serial no: 13
- 5) 5 (five) sets of application form with 1 (one) set of testimonials.

Application sent in any other format is liable to be rejected.