



Children's
U · N · I · V · E · R · S · I · T · Y

APPLICATION FORM

OFFICE USE ONLY:

No. & Date: _____

Affix your
passport size
latest Photo
with
Signature

PERSONAL INFORMATION (IN CAPITAL LETTERS)									
Mr., Mrs., Ms. etc.:	Surname			First Name			Father's / Husband's Name		
Date of Birth				Age on last date					
Gender	Male						Female		
Marital Status									
Category	Open		SEBC		SC		ST		EWS
NOTE: If candidate belong to SEBC Please attach copy of Latest non creamy layer certificate									
Permanent Address:									
						Tel:			
						Mob:			
Pin code:						Email:			
Address for correspondence if different:									
						Tel:			
						Mob:			
Pin code:						Email:			
Country of Birth:									
Nationality:									
Educational Qualification (*) From Matriculation onward									
Examination	Board/University	Year of Passing	Marks		% out of Marks	Subject Course			
			Obtained	Out of					
SSC									
HSC									
Bachelor Degree									
Master Degree									
NET/SET									
M. Phil									
Ph.D.									
Certificate/ Diploma									
Any Other									
(Note: (*) Please attach separate sheet if the space is insufficient)									

Technical/Professional Experience (Starting from the latest):						
Designation	Name of the Organization	Pay	Nature of Appointment	Period of Service		
				From	To	Period
Additional Information, If any:						
<p>I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect my candidature/appointment is liable to be cancelled/terminated. I have enclosed attested copies of the School leaving certificate, all mark sheets, cast certificate*, Non-Creamy layer certificate*, experience certificates and other supporting documents.</p>						
Place:			Signature of the Applicant			
Date:						

(Encl: As above)