 **CHILDREN’S UNIVERSITY**

**(Established by Government of Gujarat)**

**Subhash Chandra Bose Shikshan Sankul, Near Chh-5 Children’s University Circle, Sector-20, Gandhinagar-382021 (Gujarat)**

**Phone : 079 232 44569 Website :www.cugujarat.ac.in**

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**Application for the Post of Counsellor as BALMITRA  TAPOVAN  (Tick any)**

Affix your passport size latest Photo with Signature

OFFICIAL USE ONLY:

No. & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **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** | | | Married | | | |  | | | | | | | | | Unmarried | | | |  | | |
| Category | | | Open |  | SEBC | |  | | SC | |  | | | ST | |  | | EWS | | |  | |
| 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. | |  | | | |  | |  | | | |  | | |  | | | |  | | | |
| Any other Degree/Diploma | |  | | | |  | |  | | | |  | | |  | | | |  | | | |
| Technical Qualification  (If any) | |  | | | |  | |  | | | |  | | |  | | | |  | | | |
| (Note: (\*) Please attach separate sheet if the space is insufficient) | | | | | | | | | | | | | | | | | | | | | | |
| **Technical/Professional Experience (Starting from the latest):** | | | | | | | | | | | | | | | | | | | | | | |
| **Designation** | **Name of the Organization** | | | | | **Scale of Pay/Pay Structure/Pay in Pay Band + GP/AGP** | | | | **Nature of Appointment** | | | | | | | **Period of Service** | | | | | |
| **From** | | **To** | | | **Period** |
|  |  | | | | |  | | | |  | | | | | | |  | |  | | |  |
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| **(Note :**(\*) **Please indicate Pay Band and Grade Pay separately)** | | | | | | | | | | | | | | | | | | | | | | |
| **Additional Information, If any:** | | | | | | | | | | | | | | | | | | | | | | |
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| 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, experience certificates and other supporting documents.  Place:  Date: Signature of the Applicant | | | | | | | | | | | | | | | | | | | | | | |

(Encl: As above)