

# CENTRAL UNIVERSITY OF PUNJAB

Established vide Act No. 25 (2009) of Parliament

| Application Form for Teaching and Non-Teaching Posts   |   |  |
|--|---|--|
| <p style="text-align: center;"><b>Central University of Punjab</b><br/>P.O Box 55, HPO Bathinda-151 001, India.<br/>Website: <a href="http://www.centralunipunjab.com">www.centralunipunjab.com</a></p> <hr style="border-top: 1px dashed black;"/> <p>Advertisement No.....</p> | <p><b>Registration Number</b><br/>(For Office use Only)</p> <hr style="border-top: 1px dashed black;"/> | <p>Paste your recent passport size photograph here</p> |

| 1. Details of Bank payment |      |        |                  |                          |
|----------------------------|------|--------|------------------|--------------------------|
| DD Number                  | Date | Amount | Name of the Bank | DD issuing branch's name |
|                            |      |        |                  |                          |
|                            |      |        |                  |                          |

|           |   |  |
|-----------|---|--|
| <b>2.</b> | <b>Name of the post applied for</b>   |  |
| <b>3.</b> | <b>Applicant's area of specialization</b><br><small>(Applicant's area of specialization must be relevant to the area of specialization notified in the advertisement)</small> |  |

| 4. Personal details |  |   |                                 |                                |  |                |               |
|---------------------|--|---|---------------------------------|--------------------------------|--|----------------|---------------|
| <b>5.</b>           | <b>Name</b><br><small>(in Capital Letters)</small>   | <b>First Name</b>   | <b>Middle Name</b>              | <b>Surname</b>                 |  |                |               |
| <b>6.</b>           | <b>Date of birth</b>   | <b>Day</b>  | <b>Month</b>                    | <b>Year</b>                    | <b>Age as on date of advertisement</b> | <b>Years</b>   | <b>Months</b> |
| <b>7.</b>           | <b>Place of birth</b>  | <b>City / Village</b>   |                                 |                                | <b>State</b>                           | <b>Country</b> |               |
| <b>8.</b>           | <b>Father's name</b>   |   |                                 |                                |  |                |               |
| <b>9.</b>           | <b>Mother's name</b>   |   |                                 |                                |  |                |               |
| <b>10.</b>          | <b>Nationality</b>   |   |                                 |                                |  |                |               |
| <b>11.</b>          | <b>Gender</b>  | <b>Male /Female</b>   |                                 |                                |  |                |               |
| <b>12.</b>          | <b>Community/Category</b><br><small>(delete the ones not applicable)</small>                         | <i>Gen /SC /ST /OBC / Other categories</i><br><i>If other category:- Give details _____</i> |                                 |                                |  |                |               |
| <b>13.</b>          | <b>Marital status</b>  | <b>a. Married / Unmarried</b><br><br><b>b. If married, name of spouse _____</b>             |                                 |                                |  |                |               |
| <b>14.</b>          | <b>If physically disabled, indicate the relevant particulars</b>                                     | <b>If applicable, Write 'yes'</b>   | <b>Percentage of disability</b> | <b>S.No. of proof enclosed</b> |  |                |               |
|                     | <b>a. Blindness or low vision :</b>  |   |                                 |                                |  |                |               |
|                     | <b>b. Hearing impairment</b>   |   |                                 |                                |  |                |               |
|                     | <b>c. Locomotor disability or cerebral palsy (includes all cases of Orthopaedically handicapped)</b> |   |                                 |                                |  |                |               |

**15. Educational qualifications (Attach additional pages, if required)**

|   | Name of the course | Name of the Board / University | Month & Year passed | Division | % of Marks | CGPA (if grading is applicable) | Subjects studied | S.No. of proof enclosed |
|---|--------------------|--------------------------------|---------------------|----------|------------|---------------------------------|------------------|-------------------------|
|   | (a)                | (b)                            | (c)                 | (d)      | (e)        | (f)                             | (g)              | (h)                     |
| 10 <sup>th</sup> Class / equivalent                           |                    |                                |                     |          |            |                                 |                  |                         |
| 10+2 /equivalent  |                    |                                |                     |          |            |                                 |                  |                         |
| Bachelor's degree   |                    |                                |                     |          |            |                                 |                  |                         |
| Master's degree   |                    |                                |                     |          |            |                                 |                  |                         |
| M.Phil. / equivalent  |                    |                                |                     |          |            |                                 |                  |                         |
| Ph.D.   |                    |                                |                     |          |            |                                 |                  |                         |
| Indicate specifically whether Ph.D. degree has been awarded : |                    |                                |                     | Yes / No |            |                                 |                  |                         |
| NET/SLIET for lectureship, if any                             | Subject            |                                |                     | Roll No  |            | Year                            | Position         |                         |
|   |                    |                                |                     |          |            |                                 |                  |                         |
| Any other exams passed  |                    |                                |                     |          |            |                                 |                  |                         |
|   |                    |                                |                     |          |            |                                 |                  |                         |
|   |                    |                                |                     |          |            |                                 |                  |                         |

**16. Chronological list of experience (including current position/ employment)**

| Designation & scale of pay | Name & address of employers | Period of Experience |         |  | Nature of work / duties | S.No. of proof enclosed |
|----------------------------|-----------------------------|----------------------|---------|--|-------------------------|-------------------------|
|                            |                             | From date            | To date | No. of years/ months (As on date of advertisement) |                         |                         |
| (a)                        | (b)                         | (c)                  | (d)     | (e)  | (f)                     | (g)                     |
|                            |                             |                      |         |  |                         |                         |
|                            |                             |                      |         |  |                         |                         |
|                            |                             |                      |         |  |                         |                         |
|                            |                             |                      |         |  |                         |                         |
|                            |                             |                      |         |  |                         |                         |

| 17. Total period of experience      |              |               | S.No. of proof enclosed |
|-------------------------------------|--------------|---------------|-------------------------|
| a) Teaching                         | No. of years | No. of months |                         |
| i) Under-graduate level             |              |               |                         |
| ii) Graduation level                |              |               |                         |
| iii) Post-graduate level            |              |               |                         |
| b) Post-doctoral: Teaching/Research |              |               |                         |
| c) Other experience, if any         |              |               |                         |

| 18. Academic distinctions          |                               | S.No. of proof enclosed |
|------------------------------------|-------------------------------|-------------------------|
| Name of the Academic Course / Body | Academic distinction obtained |                         |
|                                    |                               |                         |
|                                    |                               |                         |
|                                    |                               |                         |
|                                    |                               |                         |

| 19. Publications, if any (Mention here only numbers. The details and copies of the reprints be enclosed) |                 |                           |                                       |                         |
|--|-----------------|---------------------------|---------------------------------------|-------------------------|
| Publications   | Published (No.) | Accepted / In Print (No.) | Communicated [other than b & c] (No.) | S.No. of proof enclosed |
| (a)  | (b)             | (c)                       | (d)                                   | (e)                     |
| Books  |                 |                           |                                       |                         |
| Research publications  |                 |                           |                                       |                         |
| Other publication  |                 |                           |                                       |                         |

| 20.Seminars/ Conferences/ Workshops/ Training programmes, attended/organized etc. | In India (No.) | Abroad (No.) | Total (No.) | S.No. of proof enclosed |
|---|----------------|--------------|-------------|-------------------------|
|   |                |              |             |                         |

| 21. Research guidance (No. of students guided) | M.Phil. / Equivalent (No.) | Ph.D. (No.) | S.No. of proof enclosed |
|--|----------------------------|-------------|-------------------------|
| Completed                                      |                            |             |                         |
| Under supervision                              |                            |             |                         |

| 22. References (Three)            |           |           |           |
|-----------------------------------|-----------|-----------|-----------|
|                                   | Referee-1 | Referee-2 | Referee-3 |
| Names & complete postal addresses |           |           |           |
| Email:                            |           |           |           |
| Phone (Landline) with STD Code:   |           |           |           |
| Mobile Ph:                        |           |           |           |
| Fax:                              |           |           |           |

| 23. Present position |                                      |                 |                 |                                     |                             |                         |
|----------------------|--------------------------------------|-----------------|-----------------|-------------------------------------|-----------------------------|-------------------------|
| Designation          | Name of the University / institution | Basic Pay (Rs.) | Pay Scale (Rs.) | Gross Pay / Total Salary p.m. (Rs.) | Increment date (Date/Month) | S.No. of proof enclosed |
|                      |                                      |                 |                 |                                     |                             |                         |

24. Any other information/ qualification relevant to the post applied for:

| 25. Candidate's Name & Address for correspondence : |  |                   |                   |
|---|--|-------------------|-------------------|
|   | Mailing address                              |                   | Permanent address |
| <b>Name</b>   |  |                   |                   |
| <b>Complete Address with pin code</b>               |  |                   |                   |
| <b>Email:</b>                                       | <b>Phone No.</b><br>(Landline with STD code) | <b>Mobile No.</b> | <b>Fax No.</b>    |
|   |  |                   |                   |

**26. List of self attested testimonials attached (original to be produced at the time of interview).  
Please tick ✓the ones applicable**

- i. Matriculation marksheet / certificate
- ii. Intermediate marksheet / certificate
- iii. B.A./ B.Sc. /B.Com (Final) marksheet/ degree
- iv. M.A./ M.Sc. /M.Com(Final) marksheet/ degree
- v. L.L.B (Final) marksheet / degree
- vi. L.L.M marksheet / degree
- vii. M.Phil. degree
- viii. Ph.D. /D.Phil degree
- ix. D.Litt, D.Sc., L.L.D degree
- x. NET, UGC-JRF, CSIR-JRF Award Certificate
- xi. Caste Certificate issued by the Competent Authority (OBC/SC/ST/etc)
- xii. Experience certificates
- xiii. Recommendation letter(s)
- xiv. Award (s) /Fellowship (s)
- xv. Publication (s)
- xvi.
- xvii.

Total Number of above self attested testimonials attached \_\_\_\_\_(in words)\_\_\_\_\_

N.B. Applications without the above self attested testimonials (applicable to the candidate) will not be entertained

**27. Declaration**

I, \_\_\_\_\_ son/daughter of \_\_\_\_\_  
 hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the Selection Committee and Executive Council meetings, my candidature / appointment may be cancelled by the University.

Signature of the applicant

\_\_\_\_\_  
 \*Name as signed (in BLOCK LETTER)  
 \*Application not signed by the candidate  
 liable to be rejected

Date : \_\_\_\_\_

**28. Endorsement by the EMPLOYER**

(The endorsement below is to be signed and forwarded by the Head of the Department / Employer of the organization / institution in the case of the in-service candidate whether in permanent / contract or temporary capacity)

**Forwarded to the Central University of Punjab, Bathinda-151 001, India:**

The applicant Dr./Mr./Mrs/Ms. \_\_\_\_\_, who has submitted this application for the post of \_\_\_\_\_ in the Central University of Punjab, Bathinda, has been working in this organization namely \_\_\_\_\_ in the post of \_\_\_\_\_ in a temporary / contract/ permanent capacity with effect from \_\_\_\_\_ in the Scale of Pay of Rs. \_\_\_\_\_. He /She is drawing a basic pay of Rs. \_\_\_\_\_. His / Her next increment is due on \_\_\_\_\_.

Further, it is certified that no disciplinary / vigilance case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by the Central University of Punjab, Bathinda.

(Signature of the forwarding officer)

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Place: \_\_\_\_\_

Date : \_\_\_\_\_

Seal