PASTE (Do not Pin or

Staple here). Paste recent passport size

Job Application Form Please read instructions carefully before filling the application

PLEASE FILL UP THE APPLICATION IN CAPITAL LETTERS IN OWN HANDWRITING

colour photograph of (Except Signature, all information is to be filled up in CAPITAL LETTERS) size 3.5 cm x 3.5 cm. Fields marked as * are compulsory The colour photograph should not be more NAME OF POST APPLIED FOR*: than 3 months old. **DETAILS OF CANDIDATE** Please put your signature across the form and the photograph 1. NAME OF CANDIDATE*: FIRST NAME: MIDDLE NAME: SURNAME: 2. FATHER'S NAME*: 3. MOTHER'S NAME*: 4. CATEGORY (TICK √)*: GEN SC ST OBC ___ MOBC ___ 5. GENDER (TICK √)*: MALE FEMALE 6. DATE OF BIRTH (DD/MM/YYYY)*: 7. AGE (as on 01-01-2017)*: Years Days Months 8. PERMANENT ADDRESS*: P.O.: P.S.: District: State: Pin Code: 9. ADDRESS FOR CORRESPONDENCE*: (If same as Permanent Address write "same as above") P.O.: P.S.: District: State: Pin code:

1. E-MA	II ID*							
		l						
ACADI		QUALIFIC NAME OF	CATION/		NAME OF	JOTITLITE	UNIVERSITY / BOARD	GRADE/DIVISIO
SSC/X Matricu	lation	IVAILE OF	COOKSE	SCHOOL	COLLEGE/III	SITIOIE	/ BOARD	/PERCENTAGE
Higher Seconda	ary /							
Graduat	ion		21					
Post Graduat	ion							
Any Other Qualification (M.Phil, Ph.D, etc.)								
M.Phil,	ation							
M.Phil, tc.) PROF	etion Ph.D, FESSIO	NAL EXPER etails (Post exure)		ion only) (Candidates i			required and ma
M.Phil, etc.) 3. PROF mploymaclose a	ESSIO nent de	etails (Post exure)	Qualificati		Candidates i	may use e		NATURE OF
M.Phil, etc.) B. PROF mploymaclose a	ESSIO nent de	etails (Post	Qualificati	ion only) (G		DURATION	N	
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M.Phil, etc.) S. PROF inployment of the second sec	ESSIO nent de as anne DES	etails (Post exure)	ORGAN EXPERIENCE	ISATION	From (Date) hths) =	DURATION	Total (in	NATURE OF DUTIES

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15. LANGUAGES KNOWN*: (PLEASE TICK √)

SI. No.	LANGUAGES	WRITING	READING	SPEAKING
	English			
1				
	Assamese			
2				
	Hindi	Q -		
3				

16. NAME AND ADDRESS OF TWO PERSONS FROM WHOM WE MAY SEEK REFERENCE ABOUT YOU*:

(The two persons must not be related to you and must have interacted with you in a Professional and / or Academic capacity for more than 2 years)

SI. No.	NAME THE REFERENCE (PERSON)	DESIGNATION	ADDRESS	MOBILE NUMBER	Email - ID
1			6		
2					

- 17. This application form should be submitted along with self attested copies of:
- a) proof of age, b) proof of educational qualifications (Mark sheets and Pass Certificates), c) work experience certificates, d) caste certificate (if any), and other relevant testimonials and documents (with self attestation)

DECLARATION

I hereby declare that all the statements made by me in this application form are true and complete to the best of my knowledge and I belief that nothing has been concealed or suppressed. I also understand that in case, any of my statements are found untrue during any stage of recruitment, selection and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action by ASULMS/Govt. of Assam.

Date:	Signature of the Cand	idate
Place:		