

**DR. SHAKUNTALA MISRA NATIONAL REHABILITATION UNIVERSITY,
LUCKNOW**

(For Teaching Posts On Contractual Basis)

For office use only : Date of receipt of application :

**Affix your
recent
Passport size
photograph
here**

(i) POST APPLIED FOR _____

Specialization, if any _____

(ii) DETAILS OF FEE PAID : - Rs. 1200/- (Gen/EWS/OBC), Rs. 600/- (SC/ST/PwD(Divyang))

NEFT/RTGS: In favour of **Finance Officer, Dr. Shakuntala Misra National Rehabilitation University**, Payable at : **Lucknow**

(Name of the Issuing Bank)

(NEFT/RTGS No.)

(Date)

(Amount)

IMPORTANT : USE ONLY BLOCK LETTERS TO FILL THIS PAGE

1. FULL NAME : _____
(As recorded in the Matriculation or equivalent certificate) (First Name) (Middle Name) (Surname)

2. PRESENT POSTAL ADDRESS :

WITH TELEPHONE/MOBILE No. /E-mail :

:

3. PERMANENT POSTAL ADDRESS :

WITH TELEPHONE/MOBILE No. :

:

4. FATHER'S NAME :
(As recorded in the Matriculation or equivalent certificate)

5. MOTHER'S NAME :

6. SEX : MALE/FEMALE (Strike-off whichever is not applicable)

7. MARITAL STATUS : MARRIED/SINGLE (Strike off whichever is not applicable)

8. DATE OF BIRTH : _____
(As recorded in the Matriculation or equivalent certificate) (Date) (Month) (Year)

9. PLACE OF BIRTH : _____
(District) (State) (Country)

10. ORIGINALLY RESIDENT OF :

11. NATIONALITY :

12. WHETHER BELONGS TO SCHEDULED CASTE/TRIBE/ OTHER BACKWARD CLASS/ ECONOMICALLY WEAKER SECTION : YES/NO (Strike off whichever is not applicable)
: Category : Gen / EWS/SC / ST / OBC

13. DISABILITY : YES/NO (Strike off whichever is not applicable)
(PHYSICALLY HANDICAPPED)
IF YES, NATURE OF DISABILITY : 1. _____ 2. _____ 3. _____

14. CANDIDATE'S MOTHER TONGUE :

15. WHAT OTHER LANGUAGES (S) (if any) THE CANDIDATE CAN SPEAK, READ AND WRITE FLUENTLY:

Language	Speak	Read	Write

16. EDUCATIONAL/PROFESSIONAL QUALIFICATION :

Sl.No.	EXAMINATION	YEAR OF PASSING	NAME OF THE INSTITUTION	NAME OF THE UNIV./ BOARD	DIVISION	SUBJECT (S)	MARKS OBTAINED & %	DISTINC-TION (if any)
1.	Matriculation/High School /Senior Cambridge / I.C.S.E./C.B.S.E. or equivalent examination							
2.	Intermediate/I.S.C. or equivalent examination							
3.	B.A./B.Sc./B.Com./ B.Tech or equivalent examination							
4.	M.A./M.Sc./M.Com./ M.Tech or equivalent examination							
5.	M.Phil.							
6.	Ph.D./D.Phil.							
7.	D.Litt./D.Sc. or Equivalent							
8.	Diplomas							
9.	ANY OTHER QUALIFICATION							

N.B. : Strike off alternatives, which do not apply in your case.

*** In case of Grading (CGPA) System, calculate equivalent percent and fill in the relevant column. Also, enclose conversion formula certified by the concerned academic institution.**

17. WHETHER THE CANDIDATE HAS CLEARED ANY ONE OF THE FOLLOWING TEST :

U.G.C.– J.R.F. Examination YES / NO

C.S.I.R.– J.R.F. Examination YES / NO

NET UGC / CSIR YES / NO

GATE YES / NO

(Strike off which is not applicable and attach self-attested copy of the award letter)

18. ANY OTHER SCHOLARSHIP / FELLOWSHIP AWARDED :

(Attach self-attested proof thereof)

19. RESEARCH PUBLICATIONS :

(Give the subject/topics of the paper published together with the name of journals. Reprints of all papers stated here should be enclosed with the application)

(Please attach separate sheet, if necessary)

20. BOOKS/MONOGRAPHS/REVIEWS PUBLISHED :

(Attach proof thereof)

21. ANY POSITION OF AUTHORITY HELD OR DISTINCTIONS :(other than scholarship) **GAINED AT SCHOOLS & COLLEGES INCLUDING GAMES AND SPORTS AND OTHER SOCIAL ACTIVITIES****22. APPOINTMENTS (if any) SO FAR HELD** :
(Specify relevant post-qualification experience only)

Sl. No.	Nature of Post	Date of Joining	Date of Leaving	Basic Salary Last Drawn	Reasons for Leaving the Post	Name and Address of Employer

23. ANY OTHER QUALIFICATION (S) RELEVANT TO THE POST APPLIED FOR :
.....

24. LIST OF SELF ATTESTED TESTIMONIALS ATTACHED HEREWITH

(Originals to be produced at the time of interview)

- (i)
- (ii)
- (iii)
- (iv)
- (v)
- (vi)
- (vii)
- (viii)
- (ix)
- (x)
- (xi)
- (xii)
- (xiii)
- (xiv)
- (xv)

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.

DECLARATION

I, _____ son of _____
hereby declare that all 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. I declare that I have never been convicted/punished by any Court of Law nor any vigilance enquiry is instituted/pending against me. In future advertisement, specific declaration be sought that i have no criminal antecedents and in case of criminal antecedents, I am filing a character certificate from the concerned authority of the district where the case was registered.

Dated : _____

Place : _____

.....
Signature of the Candidate*

.....
*Name as signed (in BLOCK LETTERS)

* Application not signed by the candidate is
liable to be rejected.