DR. SHAKUNTALA MISRA NATIONAL REHABILITATION UNIVERSITY LUCKNOW Application Form for Sign Language Interpreter Post Applied for Paste Signed Photo Have you applied earlier for this post (Yes/No) If Yes, give details, Details of Fee Payment (The requisite fee has to be remitted through Bank draft in favour of Finance Officer, Dr Shakuntala Misra National Rehabilitation University, Lucknow Transaction ID Name of Bank and Branch Date Mode of Payment Amount (Attach Receipt) (RTGS/NEFT) Name First Name Middle Name Surname (In Capital Letters) Date of Birth Day Month Age as on last date of Years Ycar Months advertisement Place of Birth City/Village Country State Father's Name Mother's Name Nationality Gender Male/ Famala/Trans

/	Gender	Male/ Fen	/ Female/Transgender			
8	Community/ Categor (Please strike out whi is not applicable)	•		C/Other Categories roof enclosed	give details	
9	Marital Status	a.	Married /	Unmarried/ Divorce	ed / Name of Spouse	
10	If Persons with Disabilities(Divyang), indicate the relevant particulars			Yes/ No	Percentage of Disability	S. No. of proof of enclosure
	indness or Low Vision: earing Impairment					
	comotor disability or co		y (include:	S		
11. A	ddress for corresponde	nce:			•	

(a) Mailing address:

(b) Permanent address:

(c) E-mail:

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(d) Mobile/Telephone:

12. Educational Qualifications (Attach additional Pages, if required)

	Name of Course	100000000000000000000000000000000000000	Year of Passing	Divis ion	CGPA (if grading is applicable)	% of Marks (pl. indicate equivalent to CGPA also)	Subjects studied	S. No. of proof of enclosure
10th Class /	(a)	(b)	(c)	(d)	(c)	(f)	(g)	(h)
equivalent 10+2/Higher								
Secondary equivalent								

Bachelor's	ALL DESCRIPTION OF THE PROPERTY OF THE PROPERT		
Bachelor's degree			
Master's degree		 	
A, B, C Level			
or Diploma in			
Sign Language		10	
Interpretation			
Any other Exams Passed			

13. Chro	nological list of E	xperience (star	ting from	current po	osition/ employment):		
Designati on		Name & Address of Employer	Period of Experience		Nature of work/ duties	S. No. of Proof of enclosure	
(a)	(b)	(c)	(d)	(c)	(f)	(g)	(h)
					,		

4. Nature of experience:	,		S. No. of Proof of
) Teaching/Interpreting	No. of Years	No. of Months	enclosure
) Under-graduate level			
Post-graduate level			
) Post-doctoral experience	9		,
) Other experience, if any			
otal Experience			
5.Academic Distinctions:			S. No. of Proof of enclosure
ame of the Academic Course/ Body	Academic Distin	nction Obtained	
*		3	
6. Names and complete postal addres rany other person having know-how oplicant)	ses of 3 referees (The re of candidate's experien	eferce should be the last e ce/ knowledge and should	mployers of the candidate I not be related to the
F	Refree-1	Refree-2	Refree-3
ames & Complete postal address			

1						
	Email:					
	Phone (Landline) with STD code					
	Thone (Landii	ne) with 31D code				
	Mobile Ph:					
	Fax:					
	Cux.		v			
			-			
	List of self att	ested testimonials atta	ched (original to be produced	lat the time of in	iterview)	
						*
L			il and the second		A AMPLIA	
	17. Please tick	the enclosures attach	ned			
	S. No.		Cheek List		S. No. of	No. of sheets
L			Check Elst	(a) II	enclosure	140. Of sheets
1						
L	i.	Matriculation mark	sheet/ certificate	*		
	ii.	Matriculation mark Intermediate mark				
		Intermediate mark				
	ii.	Intermediate mark s B.A./ B.Sc./ B.Com	sheet / certificate	2		
	ii. iii.	Intermediate mark s B.A./ B.Sc./ B.Com M.A./ M.Sc./ M.Com	sheet / certificate n (Final) mark sheet/ degree om (Final) mark sheet/ degree			
	ii. iii. iv.	Intermediate mark s B.A./ B.Sc./ B.Com M.A./ M.Sc./ M.Co 'A', 'B', 'C' Level	sheet / certificate n (Final) mark sheet/ degree			
	ii. iii. iv. v.	Intermediate mark s B.A./ B.Sc./ B.Com M.A./ M.Sc./ M.Co 'A', 'B', 'C' Level Interpretation	sheet / certificate n (Final) mark sheet/ degree om (Final) mark sheet/ degree or Diploma in Sign Languag	ge		
	ii. iii. iv. v.	Intermediate mark: B.A./ B.Sc./ B.Com M.A./ M.Sc./ M.Co 'A', 'B', 'C' Level Interpretation Caste Certificate iss (OBC/SC/ST/etc)	sheet / certificate n (Final) mark sheet/ degree om (Final) mark sheet/ degree or Diploma in Sign Languag sucd by the Competent Author	ge		
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Declaration

I hereby declare as follows:

- 1. I have read the eligibility criteria carefully as stated in the advertisement. The terms and conditions are acceptable to me and I fulfill the laid down eligibility criteria.
- 2. All Information mentioned in the application form is true and correct to the best of my knowledge and belief. It is declared that nothing has been hidden/misrepresented or concealed. In the event of any Information found hidden or false, my services may be terminated even after selection to the said post.
- 3. I have never been convicted/punished by any court of Law. No disciplinary proceeding has ever been initiated or pending against me at any level. No vigilance inquiry is pending against me. In the event of such pendency, I am filing and enclosing the character certificate from the concerned police station.
- 4. I have duly requested my Head of the Department to issue

I will submit No Objection	Certificate at the time of interview.	Objection Certificate for the post being applied.
Dated :		
		Signature of the Applicant
		*Name as signed (in BLOCK LETTER)
	*Application not	t signed by the candidate is liable to be rejected