

Application Form for Walk-in-Interview

Affix Photograph here

Cheri-Manatu, Ranchi-835222 Jharkhand.

Advertisement No: Date:						
Name of the post applied for:						
Name of the Department in which post applied for:						
Directions: Please use Capital Letters & write clearly. Use separate Forms for applying to two or more posts.						
A. PERSONAL						
NAME						
SEX	Male/ Female	DATE O	F BIRTH	dd/mm/yyyy		
CATEGORY	Gen/ SC/ ST/ OBC/EWS	NATIONALITY				
FATHER'S NAME						
MOTHER 'S NAME						
RELIGION	(For Government Statistical Report only)					
EMERGENCY CONTACT DETAILS	Phone: Mobile:					
B. COMMUNICATION INFORMATION						
	MAILING ADDRESS		PERMANENT ADDRESS			
PLOT/HOUSE NUMBER						
ROAD						
TOWN OR CITY						
DISTRICT						
STATE						
PIN CODE						
PHONE /MOBILE NUMBER						
EMAIL						

C. ACADEMIC					
Exam Passed	Name of Institution & University/Board	Subject &/ Thesis Title	Degree/ Examination	Year	Marks %
Ph.D. or					
Equivalent					
NET					
SLET					
M.Phil/ M.Tech/ equivalent					
M.Com/ M.A./					
M.Sc./ B.Tech/ equivalent		Special Paper			
B.Com/ B.A./		MAJOR			
B.Sc./ equivalent					
10+2 or					
equivalent					
Matric or					
equivalent					
Certificates/					
Diplomas					

D. Total number of years of work experience: years

D. WORK EXPERIENCE					
De	esignation	Employer	Pay Scale	Total Emoluments p.m. (Rs.)	No. of Years (From – To)
1					
2					
3					
4					
5					
6					
7					

If required, attach additional table in same format.

E. Important Awards, Patents, Schola	rships, prizes an	d other	distinctions obtained	
Name of Award & Institution		Year	Reason for Award	
F. Any other information on why you	should be consid	ered for	the post:	
G. Names & Addresses of two Referees Name:		<u> </u>		
ivanie.	Ivaille	Name:		
Address:	Addr	Address:		
City: Pin:	City:		Pin:	
Phone/Mobile:	Phon	e/Mobile	e:	
Email:	Emai	Email:		
I hereby declare that, the information for Further, I hereby declare that no crimin have never been punished or any discorganization I have been working/have were supplied to the control of the control	nal / vigilance ca ciplinary action l	s true to se is per	nding / contemplated against me and I	
Date:				
Place:			Signature of Applicant	

- Enclosures with the Application Form

 1. Birth Certificate photocopy
 2. SC/ST/OBC/EWS/PWDs Certificate photocopy, if applicable
 3. Photocopies of Degrees & Mark Sheets, experience/publication etc.