

### FORMAT OF APPLICATION (Faculty/Instructors of DISLI Course)

Advertisement No.		:					
Position Applied for		:					
1	Name in full (in Block Letters)	:					
2	Father's/Husband's Name	:					
3	Gender & Marital Status	:					
4	Permanent Address including Pin code	:					
5	Correspondence address including Pin code	:					
6	Contact details (Phone No. & Email ID)	:					
7	(a) Date of Birth (Self-attested copy for proof of age to be attached)	:	Date	Month	Year		
	(b) Age as on 01-10-2024	:	Year	Months	Days		
8	Nationality	:					
9	Religion	:					
10	(a) State your category (Gen/SC/ST/OBC) (attached certificate)	:					
	(b) Whether belongs to PwD (Yes/No) (If yes, attach self-attested copy of certificate)	:		If yes, % of disability			
11	Whether Registered with any Council (If yes, attach copy of certificate)	:	Reg. No.	Reg. Valid up to	Name of Council		
		:					

Affix self-attested recent passport size photograph

#### 12 Educational Qualifications beginning with 10th std. onwards (Attached copies of mark sheet & certificates)

Examination Passed	Year of passing	Marks details		% of marks	Div/Class	Board / University	Subject Taken
		Max marks	Marks obtained				

#### 13 Professional / Technical Qualifications (Attached copies of mark sheet & certificates)

Examination Passed	Year of passing	Marks details		% of marks	Div/Class	Board / University	College/Institution	Subject Taken
		Max marks	Marks obtained					

#### Work Experience (Latest first & proof of each experience to be attached)

Name and address of Organization	Designation & Job Type (Regular/Contract)	Scale of pay & Grade Pay /Consolidated	Period of Service				Nature of work and level of responsibilities
			From	To	Year	Month	

15	Professional training undergone, if any, and details thereof	:	
16	Any other relevant information that you may like to furnish	:	

I hereby declare that I have read the provisions given in the advertisement and all the statements made and information given by me in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect or suppressed before or after the test/interview or during the appointment period, my candidature/appointment shall automatically stands cancelled/repatriated/ terminated without any notice or compensation.

Date: -

Signature of the Candidate

Place: -