## **CENTRAL UNIVERSITY OF RAJASTHAN**

Bandarsindri, N.H.-8, Kishangarh, District Ajmer – 305817 (Raj.)

(Ref.: Advt. No. CURAJ/R/F.146/2023/5352 dated 28.03.2023)

## **Application Form**

Paste affix recent passport size photograph

al Nataile:					(Please tic	k √ wherever required
	didate:				(Please do not write Mr./ Ms./	/Sh./Smt./Dr./Prof.)
Father's/ Husban	d's Name:				<del></del>	,
Mother's Name:						
Date of Birth (DD	/MM/YYYY):	/	1	_		
,						
				. ,		
Nationality:						
State to which yo	u belong					
Place of birth:	-				(Give place of birth with name	e of District and State)
Contact Number:	Mobile: +91-	-		, Landlin	e (with STD code):	
E-mail ID :					<u> </u>	
Address for corre	spondence:					
		City:		,	District	
		State :, Pir			Pin code:	
Details of Educat	ional Qualifications	s (as on date	of advertis	ement)		
Exam Passed		-		% of Marks	Subjects	Remarks (Distinction, if an
	Hume	pussing	701440	Obtained		(Distinction, if an
2) Sr. Secondary or equivalent						
i edulvaletti – i						
3) Graduation						•
	Father's/ Husban Mother's Name: Date of Birth (DD) Sex: Category (GEN/ OI) Whether physical Nationality: State to which you Place of birth: Contact Number: E-mail ID: Address for correct Details of Educat  Exam Passed  1) Secondary or equivalent	Name of the Candidate: Father's/ Husband's Name: Mother's Name: Date of Birth (DD/MM/YYYY): Sex: Category (GEN/ OBC/ SC/ ST/Minority) Whether physically challenged: Nationality: State to which you belong Place of birth: Contact Number: Mobile: +91- E-mail ID: Address for correspondence:  Details of Educational Qualifications  Exam Passed Board/ University Name  1) Secondary or equivalent	Name of the Candidate:  Father's/ Husband's Name:  Mother's Name:  Date of Birth (DD/MM/YYYY)://  Sex:	Name of the Candidate:  Father's/ Husband's Name:  Mother's Name:  Date of Birth (DD/MM/YYYY): / /  Sex: Male ( ) Femalogory (GEN/ OBC/ SC/ ST/Minority)  Whether physically challenged: Yes ( ) No Nationality:  State to which you belong  Place of birth:  Contact Number: Mobile: +91-  E-mail ID:  Address for correspondence:  City:  State:  Details of Educational Qualifications (as on date of advertise)  Exam Passed Board/ University Year of Name Passing / Grade 1) Secondary or equivalent	Name of the Candidate:  Father's/ Husband's Name:  Mother's Name:  Date of Birth (DD/MM/YYYY):  Sex:  Male ( ) Female ( )  Category (GEN/ OBC/ SC/ ST/Minority)  Whether physically challenged: Yes ( ) No ( )  Nationality:  State to which you belong  Place of birth:  Contact Number: Mobile: +91, Landlinged:  E-mail ID:  Address for correspondence:  City:,  State:,  Details of Educational Qualifications (as on date of advertisement)  Exam Passed Board/ University Year of passing //Grade Obtained  1) Secondary or quivalent	Name of the Candidate:

Designation	Name of Organization		Date of appointment	Gross Salary (p.m.)	Nature of job
7. Appointments held	d before joining the pres	ent post:			
Designation	Name of Organization	Date of appointment	Leaving Date	Gross Salary (p.m.)	Nature of job
8 Total job experience	ce in years:				
-	of other work/ achiever			d for:	
24 Time needed to in	in the service, if selecte	d·			(done after leaving the Co
. i. Timo noodod to jo					
eby declare that:		DECLAR	<u>RATION</u>		
nation given is found to		shall forfeit the			and belief. If any part of to the disciplinary action
have not indulged in	any of the acts of misc	conduct such a			ducational authority, where property.
emic or administrative,	nances, statutes, rules	-		•	• •

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Name of applicant: