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| **Format of Resume** | **Photo**  |
| **APPLICATION FOR THE POST OF:** **DEPARTMENT:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Name | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Father’s Name | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Mother’s Name | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| DOB | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Contact No | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| WhatsApp No | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Email ID | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Address | **:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

1. **Educational Qualification (Starting form Highest)**

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| --- | --- | --- | --- | --- | --- | --- |
| Sr. No. | Name of Degree | Nam Name of College | Name of University | Months & Year of Passing | % of Marks | Proof Attached (Page no) |
| CGPA & Equivalent marks  |
| 1 |   |   |   |   |   |  |
| 2 |   |   |   |   |   |  |
| 3 |   |   |   |   |   |  |

1. **Relevant Experience (Starting form present post)**

|  |  |  |  |  |  |  |  |
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|  Sr. No. | Description | Type of Exp. Regular/Adhoc./Lect. Basis | Institute | Start Date  | End Date | Duration | Proof Attached (Page no) |
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|   |   |   |   |  |  |   |   |   |  |
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| Total Experience |  |  |   |   |   |  |

1. **Extra-Curricular Activities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. No. | Name of activities | Position | duration | Proof Attached (Page no) |
|  |  |  |  |  |
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1. **Publications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Publications | Mention whether in UGC CARE List SCI/SCOPUS/PEER Reviewed Journal | Total Publication | Description of Journal/Conference | Proof Attached (Page no) |
| Name of Journal Vol.No. Issue No. ISSN | Name of Conference Venue of conference Date held |
| International Journal  |  |  |  |  |  |
| National Journal |  |  |  |  |  |
| International Conference |  |  |  |  |  |
| National Conference |  |  |  |  |  |

Please attach all the above documents in the sequential order as per the data given above.

Signature of Application