**APPLICATION FORM**

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| --- |
| Recent Photograph |

Application for the post of ***(POST NAME)*** under RKVY-RAFTAAR scheme, supported by Department of Agriculture & Farmers Welfare (DA & FW), Ministry of Agriculture & Farmers Welfare, Government of India, in Indian Institute of Technology (BHU) Varanasi.

**1:**  **Name of Applicant (in BLOCK LETTERS):**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**2: Father’s Name:**

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**3: Email Id: 4: Contact Number:**

**4: Date of Birth:**

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**5: Permanent Address:**

**6: Address for Correspondence:**

**7: Educational Qualifications:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of Exam Passed** | **Name of Board/University** | **Year of Passing** | **% of Marks/CGPA** | **Division** | **Branch/Subject** | **Remarks** |
|  |  |  |  |  |  |  |

**8: Professional/ Additional Qualification (In chronological order only)**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S.No** | **Exam/Diploma passed** | **Year of**  **Passing** | **University/ Board/ Institution** | **Marks obtained/ Total aggregate** | **Percentage of Marks** | **Class/ Grade/**  **Division** | **Computer speed**  **K.D.P.H** | |
| **English** | **Hindi** |
|  |  |  |  |  |  |  |  |  |

**9:** **Details of Post, Qualification, Regular Employment, in chronological order. Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S.No** | **Office/ Institution/**  **Organization** | **Nature of**  **Organisation Central/State/ Autonomous/ Govt. Undertaking/ University/ Private/ NGO/ others** | **Post held/ Designation** | **Period** | | | **Total Salary** | **Nature of duties**  **(in detail)** |
| From | To | Length of service  (Years/ Months) |
|  |  |  |  |  |  |  |  |  |

**(Note: Post, Qualification, work experience details should start from present employment and in chronological order).**

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| --- | --- | --- |
| **10:** |  | Have you ever been punished during your services or convicted by a court of law? If so, give details. |
|  |  | Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed from service? If yes, give details in a separate sheet. |
|  |  | Do you have any case pending against you in any court of law? If yes, give details. |

**11:** **Give names, designations and addressees (Phone/Fax No./e-mail, if any, of three reference not related to you. References should be of persons with or under whom you have worked, or who have intimate knowledge of your work.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S.No.** | **Name** | **Designation** | **Address** | **Phone/Fax No.** | **Mobile No.** | **E-mail** |
|  |  |  |  |  |  |  |

**12: Additional information, if any, which you would like to mention in Support of your suitability for the post**

**Declaration**

I hereby declare that I have carefully gone through the advertisement notifying the vacancy and certify that to the best of my knowledge, the particulars given by me are correct. I am well aware that the application proforma duly signed by me will be assessed by the Selection Committee at the time of selection for the post. In case, any information is found to be false at any stage, even after the appointment, my candidature/services may be terminated without notice or any compensation in lieu thereof.

Place:

Date: **(Signature of the Candidate)**

**(Name of the candidate in Capital letters)**