| मौलाना आज़ाद नेशल MAULANA AZ (A Central | AD NATIO | DNAL UF shed by an Act of Hyderabad – 5 | RDU UNIVE of Parliament in 199 00 032 | ERSITY | |
|---|--------------------------------|--|--|--------------------------|---|
| | <u>PLICATION</u> FORY/NON-' | | | | RECENT PASSPORT SIZE PHOTOGRAPH DULY SIGNED BY THE APPLICANT |
| Name of the post ap | plied for: | | | | |
| . Post applied on: Dire | ect recruitmen | t D | eputation basis | Bot | h |
| T Employment Natie | tion No 0- J-4 | o. 61/2021 - | datad. NQ 1A ' | 2021 | |
| I. Employment Notific | auon No & dat | e: <u>01/2021</u> | ualeu: vo.1v. | 2021 | |
| V. Fee particulars: | | | | | |
| DD Number | Date | Amount | Name of the Ba | ank DD is | ssuing Branch & Address |
| | | | | | |
| | | | | | |
| | Father Mother | | | | |
| 3. Husband's Name (| | | | | |
| 4. Date of Birth: Da (As recorded in Matricu | | | | í ear | |
| 5. Age (as on the last of | - | | | m | onths |
| 6. Nationality | - | | Married / Unmarr | | |
| 8. Gender: Male / Fer | | | 9. Religion: | | |
| 10. Adhar No | | | - | | |
| 11. Community: Gene (Certificate from compet | ral/SC/ST/OBC | C/ PWD/ SC& | PWD/ST&PWD/ | OBC&PWD | |
| 12. If the applicant is F | WD, the follow | ving relevant p | particulars may be | mentioned: | |
| | | | If applicable, write 'yes' | Percentage of disability | Encl. No. of proof enclosed |
| (a) Blindness or Lo | ow Vision | | | | |
| (b) Hearing Impair | ment | | | | |
| (c) Locomotor Dis | ability or Cerebra | ıl Palsy | | | |

VI. Educational Qualifications:

| Exam. | Name of the | Month & | Class/ | Ma | rks | % of | CGPA | | Encl. No. |
|---|-------------|----------------|---------------|----------|--------|-------|---------------------------------------|------------------|----------------------|
| Exam. Passed | University | Year Passed | Div/ Merit | Obtained | Out of | Marks | if grading system is applicable | Subjects studied | of proof enclosed |
| 10 th Class or equivalent | | | | | | | | | |
| Inter/Sr. Secondary or equivalent | | | | | | | | | |
| Bachelor's degree (Give name) | | | | | | | | | |
| B.Ed. or Equivalent | | | | | | | | | |
| Master's Degree (Give name) | | | | | | | | | |
| M.Ed. or Equivalent | | | | | | | | | |
| M.Phil / equivalent | | | | | | | | | |
| Ph. D. | | | | | | | | | |
| Any other Degree/ Diploma | | | | | | | | | |
| (Give name) | | | | | | | | | |
| Technical Qualifications | | | | | | | | | |
| | | | | | | | | | |

VII. (a) Whether the candidate qualified UGC/CSIR NET: Yes/No

(b) Whether the candidate has qualified UGC, JRF: Yes/No

(c) Any other equal (SET/SLET) qualification: Yes/No

(if yes, give details of Subject, year and enclose proof):

| VIII. | Knowledge of Urdu: | Whether you possess the knowledge of Urdu reading, writing and |
|-------|--------------------|--|
| | | speaking (please tick YES/NO). If Yes, proof must be furnished |
| | | (Encl. No. of proof enclosed :). |

| Reading | Yes | No |
|----------|-----|----|
| Writing | Yes | No |
| Speaking | Yes | No |

IX. Total Period of Experience:

| Name of the | Designation | Designation Nature of Details of emoluments | | Duration | Length of experience | | Sl. No. | |
|------------------------|-------------|---|--|---|----------------------|-------|---------|----------------------|
| University/Institution | Temporary | post Temporary /Permanent | Scale of pay for (Regular/ Adhoc service) | Gross salary for tenure/ contractual service | (give Details) | years | months | of proof enclosed |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Total: | | | |

X. Post -Doctoral Research and other experiences:

| Name of the University/Institution | Designation Nature of Nature of and scale of post Assignment pay Temporary /Permanent | | Duration | Length of experience | | Sl. No. of proof |
|---------------------------------------|--|---|----------|----------------------|----------|---------------------|
| | | | years | months | enclosed | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | 1 | I | Total: | | | |

XI. Administrative Experience, if any (details as proof encls no.):

1.

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2.

3

XII. Academic Distinctions: (Fellowships, Awards, Honours, etc.) (proof as encls. No (Please give details such as name, awarded by, year etc)

1.

2.

3.

4.

)

XIII. Research publications:

| Publications | Published (No. of Publications) | Sl.No. of proof enclosed | Accepted / In Print (No. of Publications)) | Sl.No. of proof enclosed | Communicated to Publishers (other than b & d (No. of Publications) | Sl.No. of proof enclosed |
|-----------------------|---------------------------------------|--------------------------------|---|--------------------------------|--|--------------------------------|
| (a) | (b) | (c) | (d) | (e) | (f) | (g) |
| Books | | | | | | |
| Research Publications | | | | | | |
| Other Publications | | | | | | |

XIV. Branch of Specialization, if any:

XV. Supervisor for research degrees: Awarded Research in Progress

| | Awarded (No. of candidate) | Sl.No. of proof enclosed | Under Supervision (No. of candidate) | Sl.No. of proof enclosed |
|----------------------|-------------------------------|-----------------------------|---|-----------------------------|
| M.Phil. / Equivalent | | | | |
| Ph.D. | | | | |

XVI. Membership of Learned Bodies

- 1.
- 2.
- 3.
- 4.
- 4.

XVII. Number of literary, cultural or other activities

(e.g. attainment in sports etc.) in which the applicant is interested and Distinctions, if any, obtained the same.

XVIII. Research Projects carried out:

| | Name of the Funding Agency | | Sl.No. of | | |
|----------------------|----------------------------|------|-----------|---------------------------------|-------------------|
| Title of the Project | | From | То | No. of years / months / days | proof enclosed |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | | Sl.No. of | | |
|-------------------|------------------|------|-----------|---------------------------------|-------------------|
| Countries visited | Purpose of visit | From | То | No. of years / months / days | proof enclosed |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

XX. Participation in Corporative Life:

(Give a short account of your contribution to the College /University/ Institution where you serve or serving at present in the matter of co-curricular activities, enrichment of campus life, student Welfare, committee work, etc.)

XXI. Any other information not covered above:

XXII. Present basic pay and allowances (state separately)

Scale:Rs.Allowance:Rs.Basic Pay:Rs.Dearness AllowanceRs.City CompensatoryRs.House Rent AllowanceRs.Any other AllowanceRs.Total emoluments: (per month) Rs.

(b) Date of next increment:

(c) Age of retirement in the present post:

XXIII.

(a) Whether the candidate is receiving any pension benefits? If so, the amount of pension equivalent of gratuity must be indicated.

(b) Whether the candidate would be entitled to any pension benefits on his premature retirement form his present post, if selected for appointment in the University, and, if so, the amount of pension and the pension benefits may be indicated.

XXIV. State whether you have been at any time (a) dismissed, removed, terminated or debarred from Service as punitive action or (b) convicted by a Criminal Court. (Please tick YES/ NO)

XXV. State how you satisfy the requirements of the advertisement in respect of qualifications and experience prescribed for the post.

XXVI. Names & address with phone numbers of two responsible persons not related to you to whom a reference can be made about you:

1.

2.

XXVII. Candidate Name & Address:

| | iling Address ddress with PIN Code) | Permanent Address (Name & Address with PIN Code) |
|----------------------|--|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| E mail: | | |
| Mobile No. | | |
| Alternate Mobile No. | | |

Most of the communication will be received by the candidate by email.

XXVIII. Declaration:

I hereby declare that all the details given by me in this application are true to the best of my knowledge and belief. If anything is found false at any stage, my candidature may be cancelled without assigning any reason thereof.

Place : _____

Date :_____

Signature of the Applicant

XXIX. Endorsement by the Employer:

(The endorsement below is to be signed and forwarded by the Head of the Department / Employer of the organization / institution in the case of in-service candidate whether in permanent or temporary capacity).

| Formulad to Moulone | A nod Notional | | Cashihardi T | |
|--------------------------|----------------|------------------|--------------------|------------|
| Forwarded to Maulana | AZAO NAHODAL | Uran University. | UTACHIDOWIL | ivaerabaa. |
| I of that aca to maanana | | ciuu chiittiyi | Guennoo II II I | , acrasta |

| Post applied | for | | | , Subject | | | | | |
|---------------|------------------|---------|--------------|---|---------------------|----------------------|--|--|--|
| School/Depa | artment | | | | | | | | |
| | | | | , Date of Birth | | | | | |
| Mailing Add | lress: | | | | | | | | |
| Present scale | e (with AGP)_ | | , I | Present Basic Pay Rs:_ | | p.m. | | | |
| | | | p.n | - | | | | | |
| - | loyer (Institut | | r · | | | | | | |
| - | ongs to SC/ST | | | | | | | | |
| | C | | Voors | Months | | | | | |
| | • • | | | | | | | | |
| | - | | | Months | | | | | |
| | | ſ | NET cleared: | , Year | | | | | |
| Academic Q | ualifications | | | Publications & Research Work (Give number) | | | | | |
| Exam | Year | Marks % | University | Published | unpublished | Under Publication | | | |
| | | | | Books | | | | | |
| | | | | Research | | | | | |
| | | | | Papers | | | | | |
| | | | | Articles | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| EXPERIENCE | | | | Research Guidance | | | | | |
| | | | | Number of Scholars who have been awarded | | | | | |
| | | | | Ph.D./M.Phil. degrees under your supervision; | | | | | |
| Institution | Post held/Pay | From | То | Awarded | Under submission | Research in progress | | | |
| | nond/1 dy | | | Ph.D | 500111551011 | p10g1035 | | | |
| | | | | M.Phil | | | | | |
| | | | | Area of specialization | | | | | |

Academic Distinction/ Awards:

Any other relevant information (Special Training, etc.)

Signature of Applicant

Date

Recommendation of the Forwarding authority, Signature of forwarding authority with seal.

ACKNOWLEDGEMENT

| Received an application from Dr./Mr./Mrs./Ms | | | | | | | | | | | |
|--|--------------|-------------|--------|------------|---|----------|----|------|----------|-----|--|
| for the post | of | | | | | | in | resp | oonse to | the | |
| Employment | Notification | No.61/2021, | dated: | 08.10.2021 | along | with | а | D.D | bearing | No. | |
| | | dated | | | | _for Rs. | | | | | |
| drawn on Bank | ٢ | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Date : | | | | | Signature of the Receiver ER-I Section, MANUU, Hyderabad | | | | | | |

Note: Applications by-hand shall be accepted by the ER-I Section, MANUU in all working days from 9.30 a.m. to 5.00 p.m.