Mangalagangothri – 574 199, D.K. District, Karnataka

SIZE

A	PPLICATION	ON FOR T	HE POS	T OF			ON		
				RARY BA					
		(To be su	ıbmitted a	along with a	all enclosu	res)		AFFIX RECE PASSPORT S PHOTOGRA	
-	e of the Post Block letters								
2. Pers	sonal Detai	ils:							
Nan (in Block									
Nation	nality				Mo	ther ton	gue :		
Date of Bi		th		Age as on the last			Sex		
DD	MM	YY	C	date of application					
Name of Mo	other		'			-			
Name of Fat	ther								
Marital Stat	rus								
Name of Spo	ouse								
3. Cate	egory :								
Category Claimed	GM	SC	ST	CAT-I	II-A	II-B	III-A	III-B	
Caste									
Sub-caste									
Horizontal Reservation		oman .	Ru	Rural		Person with Disabilities		Ex. Servicemen	

Note: Enclose Certificate issued by the Competent Authority. Application without required certificate will be considered under GM Category.

4. Address (in Block letters) :

a. For Communication	
	Mr./Ms./Dr.
	PINCODE:
	Telephone No. with STD Code :
	Mobile No:
	e-mail:
b. Permanent	Mr./Ms./Dr
	PINCODE:
	Telephone No. with STD Code :
	Mobile No:
	e-mail:

5. Academic Qualifications (Starting from the highest qualification) :

Degree	Name of the University / Board	Year of Passing	% of marks	Division/ Class/ Grade

6. Details of Experience:

Sl. No.	Name of the Institution	From	То

7. Other Relevant Information if any:

DECLARATION

I hereby declare that all information given in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature is liable to be cancelled/ my appointment is liable to be terminated. I hereby agree to and abide by the rules and regulations of the University.

Place:	
Date:	Signature of the Candidate