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| For Office Use only |

SIKKIM UNIVERSITY



(A central university established by an Act of Parliament of India, 2007 and accredited by NAAC 2015)

Sikkim’s Endangered Language Documentation Project (SELDP)

*(Application form)*

Instructions: Demand Draft details:

1. Use Times New Roman font.

2. Use JPEG/JPG format for photographs.

3. Please send pdf of the filled up form.

Attach here

Passport size colour photograph

1. Advertisement No. & date ......................

2. Application for the post of ……………………………………….

3. Name of the Applicant (in block letters) : ...............................................................

4. Mother’s and Father’s names : ...............................................................

5. Mobile number : ...............................................................

6. E-mail ID : ...............................................................

7. Date of Birth & Age : ...............................................................

8. Marital Status : ...............................................................

9. Whether belongs to SC/ST/OBC\*/PWD(OH/HH/VI/):

[Attach copy of certificate in proof thereof as per GOI forms or issued by competent authority)

\*as per the list recognized and notified by the Government of India and those who do not come under Creamy Layer.

10. Languages known:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Language | Speak | Read | Write | Remarks |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

11. Address for Correspondence:

...............................................................

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12. Permanent Address

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...............................................

13. Academic Qualification

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Examination and Year of passing | Subject(s) taken | Division | Percentage of marks  Obtained | School/College attended | Name of the Board/University |
|  |  |  |  |  |  |

14. Any other relevant information

15. State briefly why do you consider yourself fit for the post applied for

16. If appointed, joining time required from the date of appointment:

17. Declaration

I declare that the statements made in this application are true and complete to the best of my knowledge and belief. I am aware that if at any stage it is found that the statements made by me herein are not true or are misleading, suitable disciplinary action may be taken against me.

Date: Signature of applicant