



# UNIVERSITY OF HYDERABAD

P.O. Central University Campus, Gachibowli  
Hyderabad – 500 046., Telangana, INDIA



## Application for a Position in the Project

|                     |   |  |                         |
|---------------------|---|--|-------------------------|
| Post(s) Applied for | : |  | Paste recent photograph |
| Advt. No.           | : |  |                         |
| Date                | : |  |                         |

| Personal Details |                                                              |  | Proof enclosed<br>Sl. No. |
|------------------|--------------------------------------------------------------|--|---------------------------|
| 1                | Full Name (in BOLD letters)<br>(As in SSC certificate)       |  |                           |
| 2                | Gender<br>(Male / Female)                                    |  | —                         |
| 3                | Date of Birth & Age<br>(As on last date of the Notification) |  |                           |
| 4                | Father's Name                                                |  | —                         |
| 5                | Nationality                                                  |  | —                         |
| 6                | Community<br>(General / OBC / SC / ST / PWD)                 |  |                           |
| 7                | Marital Status<br>(Married / Unmarried)                      |  | —                         |

| Candidate's Name & Address for Correspondence |                 |                                  |
|-----------------------------------------------|-----------------|----------------------------------|
|                                               | Mailing address | Permanent address (if different) |
| Name                                          |                 |                                  |
| Complete postal address with PIN Code         |                 |                                  |
| Email ID                                      |                 |                                  |
| Phone No.                                     |                 |                                  |
| Mobile No.                                    |                 |                                  |
| Fax No.                                       |                 |                                  |

| <b><i>Present Position held, if any</i></b> |                                              |                       |                        |
|---------------------------------------------|----------------------------------------------|-----------------------|------------------------|
| <b>Name of the employer</b>                 | <b>Name of the position and salary drawn</b> | <b>Nature of work</b> | <b>Proof encl. no.</b> |
|                                             |                                              |                       |                        |

| <b><i>Educational Qualifications</i></b> |                              |                                        |                            |                              |                         |                            |
|------------------------------------------|------------------------------|----------------------------------------|----------------------------|------------------------------|-------------------------|----------------------------|
| <b>Exam passed<br/>(class X onwards)</b> | <b>Board/<br/>University</b> | <b>Month &amp; Year<br/>of Passing</b> | <b>Division/<br/>Class</b> | <b>Percentage<br/>/ CGPA</b> | <b>Subjects studied</b> | <b>Proof encl.<br/>no.</b> |
| <b>(a)</b>                               | <b>(b)</b>                   | <b>(c)</b>                             | <b>(d)</b>                 | <b>(e)</b>                   | <b>(f)</b>              | <b>(h)</b>                 |
|                                          |                              |                                        |                            |                              |                         |                            |
|                                          |                              |                                        |                            |                              |                         |                            |
|                                          |                              |                                        |                            |                              |                         |                            |
|                                          |                              |                                        |                            |                              |                         |                            |
|                                          |                              |                                        |                            |                              |                         |                            |

| <b><i>Experience (Including Present Position / Employment)</i></b> |                                                   |                                   |                                 |                                       |                       |                            |
|--------------------------------------------------------------------|---------------------------------------------------|-----------------------------------|---------------------------------|---------------------------------------|-----------------------|----------------------------|
| <b>Designation<br/>&amp; Scale of<br/>pay</b>                      | <b>Name &amp;<br/>Address of<br/>the Employer</b> | <b>Period of Experience</b>       |                                 |                                       | <b>Nature of work</b> | <b>Proof encl.<br/>No.</b> |
|                                                                    |                                                   | <b>From date<br/>(dd/mm/yyyy)</b> | <b>To date<br/>(dd/mm/yyyy)</b> | <b>No. of Years,<br/>Months, Days</b> |                       |                            |
| <b>(a)</b>                                                         | <b>(b)</b>                                        | <b>(c)</b>                        | <b>(d)</b>                      | <b>(e)</b>                            | <b>(f)</b>            | <b>(g)</b>                 |
|                                                                    |                                                   |                                   |                                 |                                       |                       |                            |
|                                                                    |                                                   |                                   |                                 |                                       |                       |                            |
|                                                                    |                                                   |                                   |                                 |                                       |                       |                            |
|                                                                    |                                                   |                                   |                                 |                                       |                       |                            |

| <b><i>Other Details</i></b>                                                                                                |  | <b>Proof encl.<br/>No.</b> |
|----------------------------------------------------------------------------------------------------------------------------|--|----------------------------|
| <b>Have you qualified any competitive exams?<br/>(CSIR-UGT NET/ DBT JRF/ ICMR NET/ etc.)<br/>If 'yes', provide details</b> |  |                            |
| <b>Details of awards, fellowship and/or distinctions<br/>(If received any)</b>                                             |  |                            |
| <b>Title of M.Sc. dissertation, Name, Designation, and affiliation of the Supervisor</b>                                   |  | —                          |

|                                                                    |    |  |
|--------------------------------------------------------------------|----|--|
| <b>Publications, if any</b><br><i>(Attach first page as proof)</i> | 1. |  |
|--------------------------------------------------------------------|----|--|

| <b><i>Name and Contact Details of Two Referees</i></b> |                   |                   |
|--------------------------------------------------------|-------------------|-------------------|
| <b>Details</b>                                         | <b>Referee #1</b> | <b>Referee #2</b> |
| <b>Name</b>                                            |                   |                   |
| <b>Designation</b>                                     |                   |                   |
| <b>Department</b>                                      |                   |                   |
| <b>Affiliation</b>                                     |                   |                   |
| <b>Postal address with PIN code</b>                    |                   |                   |
| <b>Email ID</b>                                        |                   |                   |
| <b>Tel. No. (with STD code)</b>                        |                   |                   |
| <b>Mobile No.</b>                                      |                   |                   |

**Declaration:**

*I hereby declare that the entries in this form are correct and true to the best of my knowledge and belief. It is further declared that the entries are complete in all respects. If, at any time, I am found to have concealed/suppressed any material/information or given any false details, my candidature/appointment to the post is liable to be summarily terminated without notice or compensation. In such a case, I will abide by the rules and by-laws of the University.*

**Place :**

**Signature of the Candidate**

**Date :**