



DAYALBAGH EDUCATIONAL INSTITUTE

(Deemed University)

DAYALBAGH, AGRA-282 005

Advertisement No.DEI/Faculty (NC)-2016 dated : 30.06.2016

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photograph

1.Post Applied for : _____

2.Candidate's Name in Full : _____

3.Address for Correspondence: _____

_____ State _____ Pin _____

4.Permanent Address: _____

_____ State _____ Pin _____

5.(a) Tel. No.(with STD code) : _____

(b) Mobile No. _____

6.E-Mail Id. _____

7.Date of Birth : Days _____ Months _____ Years _____

8.Age as on 1st July 2016: Days _____ Months _____ Years _____

9.Father's /Husband's Name: _____

10.Marital Status :Married/Unmarried: _____ Sex: _____

11.Nationality : _____ Religion _____

12.Category (Gn./OBC/SC/ST/PWD): _____

13.Designation : _____

Organisation: _____

Address _____

14. Academic Qualification:

Examination Passed	Board/University	Year of Passing/ Awarded	Division	% of marks/ Grade	Subjects
High School/ Metric /SSC					
Intermediate/ 10+2/ or equivalent					
Graduation or equivalent					
Post Graduation or equivalent					
M.Phil					
*Ph.D			*Title of the Ph.D Thesis		
Any Other					

Note: enclose all testimonials and certificates.

15. Date of Submission of Ph.D Thesis : Day _____ Month _____ Year _____

16. i) Month and year of Passing of
NET/GATE or similar test : Month _____ Year _____

ii) Roll No.:

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17. Field of Specialization : _____

18. Number of publications (Please provide as per format given below in Nos. only & attach separate list also) :

Publications		Published	Accepted for Publication	Under Preparation
(a) Books	Independently			
	Jointly			
(b) Papers/ Articles	Independently			
	Jointly			
(c) Abstracts	Independently			
	Jointly			

19. Any other relevant information you wish to give in support of your candidature:

20. Name, Contact No. and address of two persons (other than relatives) to whom references can be made:

1. _____

2.. _____

21. Recommendation of the employer (to be submitted by those who are in employment) – (if applicable)

Certified that the applicant _____

Is employed as _____ in this institution w.e.f. _____

He/She is drawing total emoluments of Rs. _____ per month and his/her basic pay is Rs. _____

In the pay scale of Rs. _____ in case he/she is selected, he/she would be relieved from here.

Date: _____

Place: _____

Signature & Seal of the employer

22. Certified that the information given by me in this application form is complete and correct to the best of my knowledge & belief and nothing has been concealed there from. I also understand that in case any information is found to be false, my services shall be liable to be terminated without notice.

I have read the instructions and guidelines issued for the candidates.

Date: _____

Place: _____

Signature of the candidate