

11. Educational Qualifications :

S.N.D.T. WOMEN'S UNIVERSITY

1, Nathibai Thackersey Road, New Marine Lines, Mumbai -400 020.

Prescribed Application Form For the post of Director, National Service Scheme and Director, Students Welfare

	Γ. W o		Universit).	ty,					
Sir, letails	I, he	ereby, s	submit m	post of y applicat	ion for th	-	e of the	-	with the following
	Shri In D	. /Smt. evnagr	i <u> </u>	(Surnan	ne)	(Name			ither's Name)
	Ema Date d	il ID (N of Birt d m	m y			4. Age:] .	5. Male / Female :
8. S) in the ap NT(B) (4)	•		OBC (7)	SBC (8)	UNRESERVED (9)
	(a) N	lationa	-	Please give		(b) M o	other to	ngue :	
-	Mot	her-toi	ngue guages 1			Read		Write	Speak

Examination Passed	University / Board	Month & Year of Passing	Subjects of Specialization	% of Marks	Class/Div/ Grade awarded

Thesi	esis/Dissertation approved/submitted for M. Phil., Ph.D., etc.							
Sr.	Title of Thesis/Dissertation	Name of Guide	Year of approval /					
No.			Submission					
1.								
2.								
3.								
4.								
5.	Brief Description of research work done or directed (other than research undertaken during Post-Graduate Studies)							
	Publications							
6.	Articles							
7.	Research Papers							
8.	Books etc :							
9.	Additional remarks, if any, on any item considered relevant and important by the candidate but not include elsewhere							

12. Teaching Experience :

Sr.	Name of		Nature of	Pe	riod	salary/
No.	Institution	Held	Appointment	From	То	salary scale

- 2 -

Sr. No.	Present Position	
1.	Name of the Institution /Organization where working	
2.	Designation	
3.	Nature of appointment (Temporary/Permanent/Part- time/Full Time)	
4.	Date of appointment	
5.	Date of confirmation	
6.	Salary	
	Present Salary Scale/Pay Band with AGP	
	Present Basic Salary	
	Allowances	
	Total emoluments	
	Date of next increment	
	Amount of increment	

13.

	Other Information					
	Name and address of two persons other than relatives, to whom reference can be made about work and character of the applicant (enclosed copies of certificate from them. One of the certificates should be from the last employer and if not employed from the Head of the Institution from where the candidate has passed the last examination.)					
Sr. No.	Name Full Address					
1 (a)						
1(b)						
2.	Date when you can join, if selected					
3.	Registration No. given by the Employment exchange, if registered with them					
4.	Have you any relative/s employed at the University or any of the Institutions concerned with University, if so give name of relative, name of the Institution/Department where he/she is working					

 $14. \ Any \ other \ information, which \ is \ not \ cover \ above.$

- 3 -

15. Following documents are en	nclosed :			
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		maine &	i signature (n uie canuit

- 4 -

DECLARATION

I, hereby, declare that, all information submitted in this application and in its accompaniments is true, complete and correct to the best of my knowledge and belief. I accept that, in the event of any information being found false, incomplete, or incorrect, my candidature / appointment is liable to be cancelled / terminated at any stage. I further understand that no cognizance shall be taken of any request for withdrawal of my application. I have read carefully all instructions given on the website of the University sndt.ac.in.

Place:		
Date:		
		Name & Signature of the Candidate:
	Recommendation of	of employer
To, The Registrar, S.N.D.T. Women's Univ Mumbai -20	versity,	
Sir,		
I am forwarding an ap	oplication of Shri./Smt	working
in	as	as a duly recommended.
		Yours faithfully,
		(Name & Signature of Employer) Seal :
Place : Mumbai		
Date:		

- 5 -

DECLARATION OF SMALL FAMILY

FORM - 'A' (See Rule - 4)

Dis	strict : City : do hereby declared as follows :	
1)	That I have filled my application for the Post of	_
2)	I have (Number) living children as on today of which No. of children born after 28 th March, 2005 is (Modates of birth, if any) Date of Birth of children who born after 28th March 2005.	0 (en
3)	I am aware that, if any total No. of living children are more than two due children born after 28 th March, 2006, I am liable to be disqualified for the post.	

- 6 -

FORMAT FOR NO OBJECTION CERTIFICATE (To be typed on Employers letterhead)

TO WHOMSOEVER IT MAY CONCERN

Cert	ified	that	Shri/Si	mt./Kum							
worl	king as	s (Desi	gnation)				is a coı	nfirn	ned er	nployee o	f this
(Org	anizat	ion na	me)							This o	office
has l	NO OE	BJECTI	ON in his	s / her apply	ing for the	post	of				at
the	S.N.D	.T. W	omen's	University,	Mumbai	in	response	to	the	Circular	No
Aast	ha-01,	/Nasth	i-12/202	23-24/745	dated 03.0	7.202	23 and to	арре	ar fo	r intervie	w (if
calle	d). Th	ere is	no vigila	ance/disciplin	nary case o	eithe	r pending	or co	ontem	plated ag	ainst
him,	/her.										
					Si	gnat	ure of Head Forward				7
Place	e :										
Dato											