

**APPLICATION FOR THE POST OF LECTURER/AWS ON CONTRACT BASIS IN ENGINEERING COLLEGES AND  
POLYTECHNICS UNDER DIRECTORATE OF TECHNICAL EDUCATION CHHATTISGARH - 2011**

**(For office use only)**

APPLICATION NO.

Date of Receipt  -  -  2 0 1 1

CODE NO.

(To be filled in the BLOCK LETTERS only)

Paste self attested latest passport size photograph in this box

Encl. No.

1 POST CODE     POST NAME

(Use short form as given in advertisement)

2 CATEGORY (Please Tick) UR  OBC  SC  ST

3 NAME

SURNAME

4 FATHER'S / HUSBAND'S NAME

5 DATE OF BIRTH  -  -  Roll No. of Class 10th

As per marksheet of class 10th

6 AGE AS ON 1/12/2011  YEAR  MONTH  DAY

7 ADDRESS FOR CORRESPONDENCE STREET

CITY

DISTT

PIN  STATE

8 PERMANENT ADDRESS STREET

CITY

DISTT

PIN  STATE

9 PHONE NO. (IF ANY)  STD CODE

10 MOBILE NO.

11 NATIONALITY (Please tick)  INDIAN  OTHER  (please specify)

12 SEX  MALE  FEMALE

13 DOMICILE STATUS (Please tick)  C.G.  OTHER  (please specify)

14 DETAILS OF DRAFT AMOUNT Rs.  DD. NO.  DATE  -  - 2 0 1 1

NAME OF BANK

15 EDUCATIONAL QULIFICATION (From Class 10th onwards)

SN	EXAMINATION PASSED	DEG./DIP.	BOARD/UNIV.	YEAR	MARKS			REMARK
					OBTD	OUT OF	%	
1	HIGH SCHOOL							
2	HIGHER SECONDARY							
3	DIPLOMA							
4	HUMANITIES GRADUATE							
5	ENGG. GRAD./HUMANITIES PG							
6	ENGG. PG. /M.Phill							
7	PhD							

16 Copy of Ordinance for the conversion of Grade/Grade Point in to Equivalent percentage of marks (if applicable)

17 EXPERIENCE (Teaching Experience at Engg. College/Poly level only.)

SN	NAME OF POST	NAME OF COLLEGE	TOTAL PERIOD		CUMULATIVE TOTAL PERIOD			REMARK
			FROM	TO	YEARS	MONTHS	DAYS	
1								
2								
3								
4								
5								
6								

18 EXTRA CCURICULAR ACTIVITIES (If any Please tick)

- 1 NCC (B/C)     B     C
- 2 NSS(B/C)     B     C
- 3 NET
- 4 SLET
- 5 GATE
- 6 SPORTS LEVEL  STATE     NATIONAL

**DECLARATION BY THE CANDIDATE**

I here by declare that the above particulars are true in every respect and nothing has been concealed or withheld by me. If any of the above statements are found false at any time, my appointment may be cancelled and legal action may be taken against me.

Signature of the Candidate

19 List of Enclosure [Please tick (✓) appropriate box]

1	CASTE CERTIFICATE	<input type="checkbox"/>	9	MARKSHEET-ENGG.PG/M.Phil	<input type="checkbox"/>
2	DOMICILE STATUS	<input type="checkbox"/>	10	PhD Degree	<input type="checkbox"/>
3	DETAILS OF DRAFT	<input type="checkbox"/>	11	EXPERIENCE CERTIFICATE	<input type="checkbox"/>
4	MARK SHEET - HIGH SCHOOL	<input type="checkbox"/>	12	NCC B/C CERTIFICATE	<input type="checkbox"/>
5	MARKSHEET - HIGHER SECONDARY	<input type="checkbox"/>	13	NSS B/C CERTIFICATE	<input type="checkbox"/>
6	MARKSHEET - DIPLOMA	<input type="checkbox"/>	14	SPORTS	<input type="checkbox"/>
7	MARKSHEET-HUMANITIES GRADUATE	<input type="checkbox"/>	15	NET SCORE CARD	<input type="checkbox"/>
8	MARKSHEET-ENGG. GRAD./HUMANITIES PG	<input type="checkbox"/>	16	SLET SCORE CARD	<input type="checkbox"/>

Place :

Date :

Signature of the Candidate

Name of Candidate