

**APPLICATION FOR THE POST OF ASSISTANT PROFESSOR IN
CACHAR COLLEGE ::: SILCHAR – 1.**

For office use	Application Sl. No.: _____
	Subject: _____
	Category: _____

Please paste
your recent
PP size
photograph
here.

(Photo above the line)

1. Name of the College	: CACHAR COLLEGE ::: SILCHAR – 1.
2. Post for which application submitted	: Assistant Professor in _____ (mention the subject)
3. State the category [UR / OBC/MOBC / SC / ST(P) / ST(H)]	: (Attach, if any, self-attested photocopy of your certificate for the Reserved Category)
4. Name of Candidate in CAPITAL Letters	:
5. Name in CAPITAL Letters of Father <input type="checkbox"/> / Mother <input type="checkbox"/> / Husband <input type="checkbox"/> (any one)	:
6. Address of the Candidate (Write your complete address)	
(a) Permanent Home Address :	
Police Station :	
Post Office :	PIN: _____
District :	State: _____
(b) Present Address for correspondence :	
Police Station :	
Post Office :	PIN: _____
District :	State: _____
7. Phone Number (for contact) :	
8. Email ID :	
9. Age as on 1st of January 2017	: _____ years _____ months _____ days (Attach self-attested photocopy of Admit Card / Pass Certificate of HSLC or equivalent Examination)
10. Whether you are applying through NOC from the present employer. (YES / NO)	:
11. Education Qualification (Please fill in the Annexure A of this application and attach it)	: (Page 2 of 2)
12. Teaching Experience in terms of number of years (attach a certificate to this effect)	: _____ years
13. Are you Indian national, if so how?	:
14. Sex (Male/ Female)	:
15. Are you conversant with Local Language?	:
16. Details of Application Fee Paid	: Amount : Rs. 1,500/- only.
DD No. :	Date:
Drawee Bank :	

Signature (in full) of the Candidate : _____

Annexure – A

Details of Educational Qualifications

Attach this annexure at the top of the testimonials just below the Application Form along with *self-attested photocopies*, give a Serial No. on the copies and indicate the Serial No. in the last column.

Sl. No.	Particulars (Tick appropriate box and strike out which is not required)	Name of Board/ Council/ University	Year of Passing	Division Secured	PC (%) of Marks obtained	Sl. No. of the documents in the bunch of document submitted by you
1.	H.S.L.C. <input type="checkbox"/> / _____ <input type="checkbox"/>					
2.	H.S.S.L.C. <input type="checkbox"/> / H.S. Final <input type="checkbox"/> / _____ <input type="checkbox"/>					
3.	B.A. (Hon's) <input type="checkbox"/> / B.Sc. (Hon's) <input type="checkbox"/> / B.Com. (Hon's) <input type="checkbox"/> / B.A. (Pass) <input type="checkbox"/> / B.Sc. (Pass) <input type="checkbox"/> / B.Com. (Pass) <input type="checkbox"/>					
4.	M.A. <input type="checkbox"/> / M.Sc. <input type="checkbox"/> / M.Com. <input type="checkbox"/> /					
5.	M.Phil. <input type="checkbox"/>					
6.	Ph.D. <input type="checkbox"/>					
7.	NET <input type="checkbox"/> / SET <input type="checkbox"/> / SLET <input type="checkbox"/>					
8.	Other Qualifications					
9.	Details of Chapters / Publications with ISSN and ISBN Nos.: (attach additional sheet/s if necessary to provide complete information)					
10.	Teaching Experience: (attach a certificate to this effect)					
Sl. No.	Name of the University / College / Institution	Specify Period of Teaching		Total teaching period		
		From	To			

I hereby declare that all the statements made in the **application (including the Annexure-A)** are true and complete to the best of my knowledge and belief. In case any information is found to be incorrect, my candidature shall liable to be rejected.

Signature (in full) of the Candidate : _____