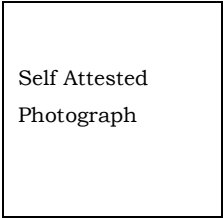


**HIGHER EDUCATION INSTITUTE SOCIETY
GOVT. COLLEGE FOR GIRLS, LUDHIANA**

Appointment Performa purely temporary and is on contractual basis in the Higher Education Institute Society, Govt. College for Girls, Ludhiana

Advertisement No.....

Date:.....



Note:-

- a. Attach Xerox copies of CERTIFICATES IN SUPPORT OF YOUR QUALIFICATIONS AND EXPERIENCE
- b. Applications received after due date or incomplete are liable to be rejected.

1. Application for Appointment as _____ in _____
 2. Name (in block letters)

3. Father's Name (in block letters)

4. Present postal address (in block letter)

Telephone:

 Pin Code:

a) Nationality

b) Whether belongs to SC/ST/Ex-servicemen/Handicapped (attach proof)

c) Marital Status

5. a) Date of Birth

b) Age as on the last date for submission of completed application for:
 years:

 Months:

 Days:

6. a) Educational qualification (from Matriculation onwards)

Examination	Univ. / Board	Year & Month of passing	Marks Obtained / Total Marks	Percentage / Division	Subjects	Position in Univ. & College if any
Matric						
10+2						
Graduation						
Post Graduation						
M.Phil						
Ph.D.(with title)						
UGC (NET/SLET)						
Any other Exam (Please Specify)						

7. Research publications (separate detailed list of publications to be attached.

8. (a) Have your ever been prosecuted/sentenced by the court of Law, if so give detail? _____

(b) Have you ever dismissed from service? if so, give detail _____

9. List of previous employment in order (Starting with most recent post held).

Name & Address of College/Institution	Date of Joining /Leaving	Designation	Nature of Job	Basic Pay P. M. & grade	Reason for leaving

10. Total experience (Attach Annexures for details)

11. (a.) Present Basic Pay Rs. _____ (b) Pay Scale Rs. _____

(c) Time required for joining the post _____

12. Any other relevant information _____

13. List of Certificates & testimonials (Attested Copies)

(i) _____ (ii) _____ (iii) _____ (iv) _____

(v) _____ (vi) _____ (vii) _____ (viii) _____

CERTIFICATE

a) Certified that the contents given in the application forms and the documents attached therewith are true and correct to the best of my knowledge.

Place:

(Signature of the applicant)

Dated:

For College Office Use Only

Check List:

1. Does the candidate fulfill essential qualification? Yes/No
2. Does the candidate have the required minimum experience? Yes/No
3. Eligible/Not Eligible.
4. Special remarks (for Non-Eligibility)

Signature of Dealing Official