



# Dr. APJ Abdul Kalam Women's Institute of Technology

A unit of Lalit Narayan Mithila University, Darbhanga,  
(Under self finance mode)



## Application for the post of Assistant Professor ( Fully on Contract Basis)

Date of Receiving  Advt. No. & Date

Roll No.  Application for the Post of / Subject of

**Note: - This application form must be filled by the candidate in blue/black ball point pen only.**

01. (i) Name

(In Block Letter)

(ii) Father/Husband Name

(In Block Letter)

(iii) Mother Name

(In Block Letter)

(iv) Date of Birth  Day  Month  Year

(In words)

(v) Age as on 01-01-2022  Year  Month  Days

02. (i) Citizen of India  1- Yes 2- No (ii) Native of Bihar  1- Yes 2- No (iii) Gender  1-Male 2-Female 3. Transgender

(iv) Category  1- GEN 2. BC 3. EBC 4. SC 5. ST

03. (i) Physical disability  1- Yes 2- No If yes, mentioned the type  1- Blind 2- Deaf & Dumb 3- Physically Disable

Percentage of disability  1- Above 40% 2- Below 40%

(ii) Are you employee of L.N.M.U.  1- Yes 2- No (iii) Are you Ex-Army Man  1- Yes 2- No

Designation  Office  Place

(iv) Do you have essential/minimum qualifications as per advertisement  1- Yes 2- No

04. Mobile Numbers 1 & 2 :


E- mail

Full Name & correspondence address

Name: - .....  
Address .....  
.....  
.....  
Dist ..... State .....  
Pin code



Candidate Full Signature

## 05. Permanent address

		Dist.	
State		Pin code	

06. (i) Marital status  1- Married 2- Unmarried 3. Divorced07. (i) Educational Qualifications:

Examination Passed	Faculty Subject	Session	Passing Year	Institute	Board/University	Marks Obtained	Full Marks	%
Graduation								
Post Graduation								
Ph.D.								
Any Other								

(ii) UGC-CSIR conducted NET or GATE examination detail (if applicable):

Examination Passed	Faculty/Subject	Passing Year	Institute	University

(iii) (a) Description of Research Paper Publication (if applicable):

Sl. No.	Name of Published Journal	Name of the Publisher	Referred/Non-referred Journals
1.			
2.			
3.			
4.			
5.			
6.			

(b) Seminar/Conference (if applicable):

Sl. No.	Name of the paper presented in seminar/conference	International/National	The certificate of the Chairman/convener organizing the seminar should be attached to the certificate that the paper has been presented by you in the original form
1.			
2.			
3.			
4.			
5.			
6.			
7.			

8. Details of previous employment (if any): - \*

Designation	Organization	Permanent/ Contract	Date of Joining	Date of Leaving	Date & Reason of resignation (if applicable)	Gross Salary

\* If employed, please complete the following:

**NO OBJECTION**

Dr./Mr./Ms.....is working as.....  
on.....basis w.e.f..... There is “No Objection” against his/her application and  
he/ she will be relieved, if selected for the post applied for.

Signature  
Name:  
Designation:

(Seal)

9. Physical mark of applicant

10. Any other information.....  
.....  
.....

11. Application fee paid details

.....  
.....

**Declaration**

I hereby declare that above information provided by me is true & correct to the best of my knowledge. Any information, if found incorrect or misleading at any stage, shall lead to cancellation/ termination of candidature and I shall have no claim thereafter. I agree to abide by all the rules & regulations of the University/APIJAKWIT, amended, up to date.

Self attested  
Passport size  
photo

Date : .....

Candidate Full Signature

Place : .....

List of Enclosures ( in chronological order):