

## प्रवापे ANUNDORAM BOROOAH INSTITUTE OF LANGUAGE, ART & CULTURE, ASSAM NORTH GUWAHATI, GUWAHATI- 30

## APPLICATION FORMAT FOR FINANCE & ADMINISTRATIVE OFFICER (Direct Recruitment)

۵)	ADVERTISEMENT NO. & DATE:			n	OST NO	
a)						
D)	NAME OF THE POST APPLIED FO	OK :	••••••	•••••	••••••	••••••
c)	CATEGORY OF THE APPLICANT	?	UR	SC	ST	OBC
	(attested copy of certificate to be submitted Except For <b>UR</b> )					
d)	Details of fees paid and enclosed: De	emand Draft N	Vo	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
	Amount:`Date	Bank	<b>:</b>	•••••	Branch	•••••
1.	Name in full (in block capital letters): .	••••	• • • • • • • • • • • •		• • • • • • • • • • • • •	• • • • • • • • • • • •
	Father's name:					
3.	Permanent Address :					
٥.	1 crimanent / tudiess					
	PIN		•			
4.	Address for communication:		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •
	PIN	C	ontact pho	one no		
	Email					
	id					
5.	Date of birth in Christian era:					
6.	Age on the last date of application (that	t is :		):		• • • • • • • • • • • • • • • • • • • •
7.	Nationality	:				
8.	Religion	:				
9.	Sex	:				
10.	Category (SC/ST/OBC) (Please attach of	copy of certific	cate) :			

11	Details of Academic (	Qualifications (	(Please enclose attested	nhotocopies) ·
11.	Details of Meddelline	Qualifications (	(1 lease chelose attested	photocopies,.

Exam. Passed	Year	of	Division/	Percentage	Name	of	the	Rank	and
	Passin	ıg	Class	of marks	Board/U	niversity		Remark, if a	ıny
Matriculation/HSLC									
PU/HSSLC									
B.Com &									
Equivalent									
M. Com. & Equivalent									
Others (Please specify)									

12. Subject in Master's degree:	
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13. Field of specialization in Master's degree :	
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## 14. Details of past services in autonomous Institutions etc. (please enclose supporting documents):

Items	Post-I	Post-II	Post-III	Post-IV	Post-V	Post-VI
Name of the Post held						
Name of the Institution						
Period(fromto .=year,Monthdays)						
Scale of Pay/Pay band/ Band Pay/AGP, as applicable						
Temporary/Permanent/ Ad-hoc etc.						
Nature of duties						
Minimum Qualification Required						
Remark, if any						

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15.	Present position held with date:
16.	Present Pay Band, Band Pay and GP:
17.	Effective date of present Pay Band, Band Pay and AGP :
18.	Name of the employer, with address:
	PINContact phone no
	Email id
19.	Names of two referees not related to the applicant:
a)	
	Contact phone noEmail id:
b)	
	Contact phone noEmail id:
20.	Declaration: I hereby declare that I have carefully read and understood the instructions and regulations referred here in and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case any of the information is found to be incorrect at any stage.
	Signature of the applicant
	Date:
	Place : Designation/Department:
	Address: