Application No.: (For o	office use	only)
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P.G.D.AV. College (Eve.)

(University of Delhi) Nehru Nagar, New Delhi - 110065 Tel: 011-29845214, Fax No. 011-29840166 Website: www.pgdaveve.in Please affix a Passport Size Photograph

APPLICATION FORM FOR NON-TEACHING POST

Details of Fee Paid: Name of the issuing Bank				Date: Drawn on: New				
Last date of subm	ission of Applicati	on Form i	s Saturday, th	e 6 th September, 20	<u>014</u>			
1. Post applied for				Category				
2. In the Department of								
3. Advt. No.	NT/2014/01		Dated:	16 th August, 20	14			
4. Name of the candidate (in	Block letters)							
5. Father/ Husband's name								
6. Date of Birth (In Figures)	6. Date of Birth (In Figures)							
(In Words)								
Age: Year	s : Mor	nths	days	(as on 0	6/09/2014)			
7. Nationality	Male/Fema	ıle	Mar	ried/Unmarried				
8. Present postal address with	th pin code							
		• • • • • • • • • • • • • • • • • • • •	Pin C	ode				
9. Permanent address with p	in code .							
			Pin C	Code				
10. Phone No				2)				
11. E-mail ID is Mandator	ry (for fur	ther inforn	nation, please cl	neck your e-mail id	frequently)			

	_					Caste/Tribe and attach a
	-			_		efence Personnel killed in
			•		_	ils
Institut	•	versity? If so	o, please specify			s in any examination by any
Sl. No	Name of the Examination/ passed	Year of Passing	Name of the Board/ University	% of Marks obtained	Divn.	Subjects

17. Professional Qualifications:

Sl. No	Name of the Examination/ passed	Year of Passing	Name of the Board/ University	% of Marks obtained	Divn.	Subjects

18. Details of Employment (Work Experience), if any.

	Name of the Office/Instt./Orgn.	Designation	From	То	Scale of pay/Grade Pay and basic pay	Status of Orgn. i.e. Govt./ Private/ PSU
-						
	Total 1	Experience:	У	ears	Months	
19	. Are you attending any p institution you have joir			•		he course and the
20	. Indicate the time you w	vill require to join, if	selected			
21	. Do you know typewriting	ng/shorthand? If so s	state speed:	Гурing in En	glish Hin	diw.p.m.
	Shorthand (English)	w.p.m.		Shorthand	(Hindi) w.p.m.	
22	. Have you applied for a applied:	• •	•		-	nd date when
23						ation
	Name of the Organizati	on Membership No.	Stat	us	Any Contr	ibution
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_						
24	Any other information	ı:				

25. F	References: (one	e of	whi	ch 1	mus	t be	yo	ur p	orev	vio	ous	em	plo	yer):											
1.	Name:																									
	Official Addre	ss: .																						· 		
	Tel: (Fax):							• • • •	•••	M	ob	: 1)								. 2)						
	Email Id:																									
2.	Name:											I	Des ¹	igna	ıtioı	1:										
	Official Address													_												
	Tel: (Fax):								• • •	M	ob	: 1)								. 2)						
	Email Id:																									
Dated	:																									
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									<u>D</u>	<u>ec</u>	claı	rati	<u>ion</u>													
	ffirm that the in				_																•					
(s), my	candidature ma	ay sı	umn	nari	ly b	e rej	ect	ted	or e	em	npl	oyr	nen	t te	rmi	nate	ed.									
Place.																										
Date																		Sig	na	tur	e of	the	App	olic	ant	

(For the candidates already employed)

Forwarded with the remarks that the facts st	tated in the above application have been verified and found correct
and this institution/organization has no obje	ection to the candidature of the applicant being considered for the
post applied for	.
Designation:	Signature
Address:	(Head of the institution/Organization) (with office seal)
Contact No.	Date:
List of enclosures:-	

Notes:

- (i) Attested copies of all relevant certificates, degrees, testimonials etc. should be attached with the application and the originals must be produced at the time of interview and if selected, at the time of joining.
- (ii) Applicants who are in employment should send their applications through their employers.
- (iii) One passport size photograph should be pasted on the application form.
- (iv) Incomplete application forms will be rejected.
- (v) No T.A./D.A. will be paid for attending the prescribed tests/interview.
- (vi) Attach a self-addressed & stamped envelope of 22cm X 9cm alongwith the application form.