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**DR.Y.S.R.HORTICULTURAL UNIVERSITY**

**ADMINISTRATIVE OFFICE:VENKATARAMANNAGUDEM**

**WEST GODAVARI DISTRICT**

 **Advt.No.2/RC/NT/2017, Dt.17.11.2017**

 Applications are invited in the prescribed format for the posts of **Assistant Engineer (Civil) & Assistant Engineer (Electrical)**. Information pertaining to number of vacancies, reservation, qualifications, experience, registration fee, general and application format is available in the University website [www.drysrhu.edu.in](http://www.drysrhu.edu.in). The last date for submission of applications is 16.12.2017 at 4.00PM.

 B.SRINIVASULU

 REGISTRAR

**Dr. Y.S.R. HORTICULTURAL UNIVERSITY**

**ADMINISTRATIVE OFFICE: VENKATARAMANNAGUDEM**

**WEST GODAVARI DISTRICT**

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**Advt.No.2/RC/2017, dt.17.11.2017**

Applications are invited in the prescribed format together with Registration Fee of Rs.1250/- (Rs.750/- for SC/ST) for the under mentioned posts. Candidates should possess the prescribed qualifications as on the date of this notification. The registration fee amount payable by way of crossed Demand Draft in favour of THE COMPTROLLER, DR.Y.S.R.HORTICULTURAL UNIVERSITY, VENKATARAMANNAGUDEM payable at TADEPALLIGUDEM, WEST GODAVARI DISTRICT, ANDHRA PRADESH on any Nationalized bank and the same can be enclosed with filled in application form

**1.Assistant Engineer(Civil) – 3 posts**

 Scale of Pay : Rs.31460-84970( RPS, 2015)

 OC-W-1, SC-W-1, OC-1

**2.Assistant Engineer(Electrical) – 1 post**

 Scale of Pay : Rs.31460-84970(RPS, 2015)

 BC-A-W-1

**Age**

For all the above posts, age as on 01.07.2017 should be between 18-42 years. Upper age limit is relaxable by 5 years in case of SC, ST & BC candidates and 10 years for physically handicapped candidates.

Candidates for all the above posts must be able to speak, read and write Telugu language.

**QUALIFICATIONS**

**Essential:**

B.Tech/B.E. in the concerned branch from any recognized institution.

**Desirable:**

 Experience in respective fields from any reputed firms

**METHODS OF SELECTION**

1. **Written Test**:

|  |
| --- |
| **OBJECTIVE TYPE** |
| Paper – 1 | General Studies | 150 Marks | 150 questions | 150 Minutes |
| Paper – 2 | Subject (B.E./B.Tech Standard) | 150 Marks | 150 questions | 150 Minutes |

1. **Oral Test(Interview)**

Selected candidates shall be governed by Dr.Y.S.R.Horticultural University (Conditions of Service) Statutes 2007 and they are eligible for new Contributory Pension Scheme of the University and such other conditions as may be prescribed by the University from time to time. All the selected candidates are liable to be posted or transferred to any equivalent posts.

 **GENERAL INSTRUCTIONS TO THE CANDIDATES**

1. Candidates has to fill in the application with his own handwriting.
2. Candidates must be able to speak, read and write Telugu language.
3. Application with incomplete information or false information will be rejected.
4. Applications received without support of attested copies of documents and certificates including work experience will be rejected.
5. Any action/attempt influencing the University authorities either personally or by letter or any other way entails for disqualification of the candidature.
6. Candidates working under Government/Quasi Government and Public Sector undertaking/Autonomous bodies have to send their applications through proper channel.
7. The University reserves the right to fill or not to fill some or all the posts now advertised.
8. Separate applications shall be submitted for each post along with prescribed fee.
9. The in-service candidates of Dr.Y.S.R.H.U may send their applications directly.
10. The applicants should appear for written test and interview when called at their own cost.
11. The date of written test/interview will be intimated to the eligible candidates.

.The prescribed application forms for the posts can be down loaded from the University website www.drysrhu.edu.in. Such filled in applications should reach the undersigned on or before **16.12.2017** at 4.00 PM but the applications received after **16.12.2017** at 4.00 PM cannot be entertained. The University is not responsible for late receipt of applications due to postal delay.

 **B.SRINIVASULU**

 **REGISTRAR**

Date: 17.11.2017

Venkataramannagudem

**Dr. Y.S.R. HORTICULTURAL UNIVERSITY**

**ADMINISTRATIVE OFFICE: VENKATARAMANNAGUDEM**

**WEST GODAVARI DISTRICT**

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Application for the post of **Assistant Engineer**

 Affix Self attested recent Passport size photograph of the candidate

|  |
| --- |
|  Post applied ( Civil / Electrical ) :  |

1. Name of the Candidate :

(In Block letters)

1. Date of Birth :
2. Place of Birth :

(Including District)

1. Nationality :
2. Social Status

(OC/SC/ST/BC-A, BC-B, BC-C, BC-D/

BC-E/P.H(Proof should be enclosed) :

1. Marital Status :
2. Gender :
3. Mother tongue :
4. Languages known(put a √ mark in the relevant column for “YES” and X mark for “NO”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.No. | Language known | Speak only | Read only | Read and write |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |

1. Father’s Name :

Father’s Profession and Address

1. Address for correspondence :
2. Permanent address :
3. Email ID :
4. Mobile No. :
5. Educational qualifications :

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.No. | Name of the Examination | Name of the Board & University | Registration No. | Year & Month of passing | Max.Marks | Marks obtained | Percentage |
| 1. | SSC |  |  |  |  |  |  |
| 2. | Intermediate |  |  |  |  |  |  |
| 3. | Graduation |  |  |  |  |  |  |
| 4. | Post Graduation |  |  |  |  |  |  |
| 5. | Any other Degree |  |  |  |  |  |  |

1. Technical qualifications :

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.No. | Name of the examination | Name of the Board | Registration No. | Year & Month of passing | Max.Marks | Marks obtained | Percentage |
| 1. |  |  |  |  |  |  |  |

1. Experience :

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S.No. | Name of the Organization & Place | Post held | Monthly salary received | Service | Period |
| From | To | YY | MM | DD |
| 1. |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |

1. Details of Registration Fee:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of the Bank & Branch | D.D.No. | Date | Amount |
|
|  |  |  |  |

**Declaration**

I certify that the information furnished above is true and correct to the best of my knowledge and belief. If the above information is found to be false/ incorrect, my services can be terminated at any time without notice. Further no medical authority has declared me not eligible for Government service earlier.

 SIGNATURE OF THE APPLICANT

Date:

Place: