

# UNIVERSITY OF ALLAHABAD

**(Established by Act (2005) of Parliament)**

# Application Form for Research Staff for a CST, U.P. Funded Project

(PLEASE FILL THE FORM IN CAPITAL LETTERS USING COMPUTER ONLY)

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| Post applied for: **\_\_JUNIOR RESEARCH ASSISTANT\_\_\_\_\_** |
| **(For office use only)**Registration Number (Signature) | **Recent photograph** |
| **Personal Information (Please fill all the information in capital letters using computer only)** |
| **i)** | Name: |  |
| **ii)** | Father’s Name: |  |
| **iii)** | Mother’s Name: |  |
| **iv)** | Date of Birth (DD/MM/YYYY) |  |
| **v)** | Age (as on 1st April, 2022) |  |
| **vi)** | **Are you Domicile of Uttar Pradesh? Yes No**  |
| **vii)** | **Corresponding Address:** |
| ***a)*** | Line1: |  |
| ***b)*** | Line 2: |  |
| ***c)*** | City: |  | ***d)*** | District: |  |
| ***e)*** | PIN: |  | ***f)*** | State : |  |
| ***g)*** | E. Mail ID |  | ***h)*** | Mobile No. |  |
| **viii)** | **Permanent address:** |
| ***a)*** | Line1: |  |
| ***b)*** | Line 2: |  |
| ***c)*** | City: |  | ***d)*** | District: |  |
| ***e)*** | PIN: |  | ***f)*** | State : |  |

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| **(A) Educational qualifications** |
| **Qualification** | **Name of course** | **Name of the Board/ University/ Organization** | **Major Subjects studied** | **Year of passing** | **% of Marks** | **Division** |
| **(a)** | **(b)** | **(c)** | **(d)** | **(e)** | **(f)** |
| **10th Class / equivalent** |  |  |  |  |  |  |
| **10+2 Class/ equivalent** |  |  |  |  |  |  |
| **Bachelor's degree** |  |  |  |  |  |  |
| **Master's degree** |  |  |  |  |  |  |
| **Ph. D** |  |  |  |  |  |  |

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| **(B) Research experience (Last 05 years only)** |
| **Designation** | **PDF/ Research Project** | **Name of Department & University/ Organization** | **Period of Experience** | **Salary** |
| **From date** | **To date** | **No. of years** |
| **(a)** | **(b)** | **(c)** | **(d)** | **(e)** | **(f)** | **(g)** |
|  |  |  |  |  |  |  |
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| **(C) Declaration:** |
| I**, \_\_\_\_\_\_\_\_\_\_\_**son/ daughter of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected before the Selection Committee members, my candidature/ appointment may be cancelled by the University.Digital Signature of the Applicant \*Name as signed (in BLOCK LETTER)  |