

**Educational Multimedia Research Centre (EMMRC)
Jai Narain Vyas University, Jodhpur**

**Application form for Direct Recruitment against
Advertisement No. 54/2023-24**

<p>Post for which Applied :</p> <p>Details of Demand Draft:</p> <p style="text-align: center;">.....</p>	<div style="border: 1px solid black; width: 80%; margin: 0 auto; padding: 20px 0;">Affix self attested passport size photo</div>
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GENERAL INFORMATION AND ACADEMIC BACKGROUND

1. **Name (in Block Letters)** :

2. **Mother's Name** :

3. **Father's Name** :

4. **Date of Birth** :

5. **Age as on the last date of submission of application** : Years:.....Months: Days:

6. **Gender** :

7. **Domicile & Nationality** :

8. **Present Designation** :
With Pay Band & Grade Pay / AGP

9. **Indicate whether belongs to SC/ST/OBC/PH category** :

10. **Permanent Address** :.....
 :.....
 :.....

11. **Address for correspondence** :.....
(with Pin code) :.....
 :.....

12. **Telephone / Mobile No:**
Email
(Desirable)

13. **Have you ever been convicted or any criminal proceeding pending?**
Please give details.

14. Academic Qualifications (Secondary & onwards):

Examinations	Name of the Board/ University	Year of passing	Percentage of marks obtained	Division/ Class/Grade	Subject
Secondary					
Sr. Secondary/High School					
Graduation					
Post Graduation (with subject)					
Other examinations, if any					

15. Research Degree(s)

Degrees	Title	Date of Award	University
M. Phil.			
Ph.D.			
any other			

16. Prior Appointments held

Designation	Name of Employer	Date of Joining		Salary (with pay band & Grade pay/AGP)	Reasons for leaving
		Joining	Leaving		

17. Work Experience - Administrative, Teaching, etc.

Designation	Name of Employer	Salary (with pay band & Grade pay/AGP)	Nature of work	Duration

18. Any Other Relevant Information

S. No.	Particulars

Note: The Candidate may increase number of rows/ adjust columns/use extra sheets in prescribed format, wherever required.

LIST OF ENCLOSURES: *(Please attach self attested copies of certificates related to academic and professional qualifications and experience.)*

- | | |
|---------|----------|
| 1 | 6 |
| 2 | 7 |
| 3 | 8 |
| 4 | 9 |
| 5 | 10 |

I certify that the information furnished in the application is true. I understand that if any of the information is found false my candidature/appointment shall be automatically cancelled.

Signature of the Applicant

Place :

Date :

FOR THE USE OF CANDIDATES IN EMPLOYMENT

Certified that _____ holds the post of _____ in the Department of _____. This office has no objection for the consideration of his/her application and in case of selection he/she will be relieved as per rules.

No. _____

Date _____

Signature _____

Designation _____

Office Stamp _____