

**SHRI JAGANNATH SANSKRIT VISHVAVIDYALAYA  
SHRI VIHAR , PURI**



PHOTO

**APPLICATION FORMAT (TEACHING)**

APPLICATION FORM FOR THE POST OF \_\_\_\_\_ (SUBJECT \_\_\_\_\_)  
(The entries in this form should be made in English by the candidate in his/her best handwriting. If the space below is inadequate, information may be given in a separate sheet and be attached)

**(Application incomplete in any respect will not be entertained)**

Demand Draft No.&Date : \_\_\_\_\_

Name of the Bank and Place : \_\_\_\_\_

Amount in Rs. \_\_\_\_\_

Advertisement No.& Date \_\_\_\_\_

1. Full Name of the Candidate  
(In Block Letters) \_\_\_\_\_

2. Father's Name \_\_\_\_\_

3. a) Marital Status \_\_\_\_\_  
b) If married , whether he/she  
has more than one spouse living \_\_\_\_\_

4. In case of Married Woman,  
Name of husband \_\_\_\_\_

5. Permanent home address \_\_\_\_\_

6. Present Address in full  
With Pin Code \_\_\_\_\_  
(Any change should be reported  
at once to the Registrar, Shri  
Jagannath Sanskrit Vishvavidyalaya  
ShriVihar ,Puri

7. Contact Telephone/Mobile No./ E-Mail \_\_\_\_\_

8. Date of Birth  
(as per HSC Certificate  
or Equivalent) \_\_\_\_\_

P.T.O

9. Sex (Male / Female)

\_\_\_\_\_

10. Nationality

\_\_\_\_\_

11. a) Candidate's Mother Tongue

\_\_\_\_\_

b) Other languages known :

Language	Read	Write	Speak

12. a) Whether Scheduled Caste /  
Scheduled Tribe /SEBC/

**YES / NO**

(If yes, valid certificate in support thereof from the competent authority should be enclosed)

Put a ( ✓ ) Mark

SC	ST	SEBC

b) Whether person with disability

(If yes , certificate from Medical Board or competent authority should be Enclosed)

\_\_\_\_\_

13. Academic qualification

(Examinations passed from Matriculation /Higher Secondary onwards to Doctorate degree) etc. Full and exact details must be given , A copy of the certificate and mark sheet of each examination (Self attested) should be attached to this application)

Examination or degree passed	Name of the Board / University	Subject taken	Total Marks / Max. marks	Division / Grade	% of marks obtained in aggregate	Year of passing
High School / HSC						
Intermediate / Higher Secondary Examination						
Bachelor degree						
Post Graduate						
M.Phil						
Doctorate						
Others						

14. Whether employed in any Govt. or Non Govt. Office / University/Corporation / Local Body and if so full particulars thereof (Administrative / Other experience, if any, provide the proof of experience from the authority. Please enclose separate sheet (duly signed) if not covered within the column.

Name of the Institution / department / organization	Designation	Nature of the Post	Period (give date)		Appointing authority	Remarks, if any
			From	To		

15. Detailed list of Research Publication (Use separate sheet, duly signed)  
(Inclusive of Books , Research / Policy paper / Articles etc)  
(One copy of each be enclosed)

16. a) Name of the present employer  
And organization (if employed) \_\_\_\_\_
- b) Details of present employment \_\_\_\_\_
- i) Name of Post held \_\_\_\_\_
- ii) Date of appointment \_\_\_\_\_
- iii) Whether permanent /  
Temporary or on Probation \_\_\_\_\_
- iv) Whether State / Central  
Government /PSU/Private/  
any other \_\_\_\_\_
- v) Scale of Pay \_\_\_\_\_
- vi) Whether present pay  
acceptable or not \_\_\_\_\_

17. a) Have you ever been subjected to any disciplinary action, as a student and / or as an employee ? \_\_\_\_\_

b) Have you ever been dismissed / suspended from service /employment ? if so , please specify \_\_\_\_\_

c) Police record against you ?

If yes , give details

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d) Whether any court case pending

against you ? If yes, give full details

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18. If appointed, when can you join in the Post.

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19. Any other information

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20. Furnish the detailed list of documents enclosed to the application (attach separate sheet, if required)

1)

2)

3)

4)

5)

6)

7)

21. **Declaration to be signed by the candidate**

I solemnly declare that the entries made in this form are correct and true to the best of my knowledge and belief. If at any time , I am found to have concealed / suppressed any material / information or given any false details , my appointment shall be liable to be summarily terminated without notice or compensation.

Place:-

Signature of the Candidate  
(in full)

Date:-

22. Forwarded with the remark that the institution / organization has no objection to the candidature of the applicant being considered for the post applied for, as above.

Place:

Date :

Fax :

Email :

Signature  
Authorized officer / Head of the institution / organization  
Designation (Seal)