Paste your coloured Passport Size Photograph

(A state University established under the Assam Act No. XXXV of 2017) Narayanpur, Lakhimpur, Assam Pin-784164

<u>Application for the Post of Junior Assistant/ Library Assistant/ Multi-Tasking Staff</u> (Mention the appropriate post)

Advertisement No. & Date:

Post applied for:	
Details of application fee paid	
Name of the Bank:	
Demand Draft No.:	
Amount Paid:	
1. General Information of Applicant	
Name	
Ivanic	
Nationality	
Religion	
Date of Birth (dd/mm/yyyy)	
Date of Birth (dd/filin/yyyy)	
Age as on 01.01.2024	
Gender (male/female/transgender)	
Father's/ Mother' Name	
rather s/ Wiother Traine	
Marital status (married/unmarried)	
Category: SC/ST(P)/ST(H)/OBC-	
MOBC/PwD/Gen	
In the case of PwD, please state the nature of	
disability as OH (Orthopedically Handicapped),	
Handicapped) or MD (Multiple Disability)	
Address for Correspondence	
Permanent Address	
Phone No. (Please indicate STD & ISD wherever	Mobile No.:
applicable)	Y 111 AY
	Landline No.:
Email ID	

2. :	Educational	Qualification	(in	chronological	order):
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Sl.	Name of the	Board/	Name of the	Div/Grade/	Total Marks	•	Year of
No.	Examination	University	Institution	Class		CGPAof	Passing
						Marks	

4.	Details of ex	perien	ce:						
	Details of pr		cy in c	computer:		Duration of the	he Course:		
	Name of the Institute:								
Ivan	ne of the flist	itute.							
6.	Languages	Know	n•						
7. I	Knowledge (of Ass			1				
	Speaking Readin		ling	ing Writing					
			_						
8. l.	8. Employment details in chronological or Post held Pay Scale Organization					Nature of Duration			Experience
o.						Duties	Date of	Date of	(in years and
							joining	leaving	Months)
	Ctata manu J								
	State your d	micile	certific	cate)					
	(Attached do								
10.	(Attached do	t Exch	_	_					
10.	(Attached do	t Exch	_	_					

DECLARATION

I, Sri/Mr./Ms./Mrs. hereby, declared
hat all the statements/particulars made/furnished in this application are true, complete and correct to
he best of my knowledge and belief. I also declare and fully understand that in the event of any
nformation furnished being found false or incorrect at any stage, my application/candidature is liable
be summarily rejected at any stage, even after my appointment.

Place : (Signature of the Applicant)

Date :

LIST OF ENCLOSURES:

- 1. Application fee payment related papers
- 2. NOC from the employer (in Annexure-1)
- 3. One copy of all testimonials to support caste/category/age/academic qualifications
- 4. One copy of all testimonials to support working experience etc.

(Institution Letter Head)

NO OBJECTION CERTIFICATE

This is to certify that	(Name of the University/ Institute)
has no objection, if Sri/Mr./Mrs./Ms	, Designation,
Department/Centreof this University	ersity/ Institute applies for the position of
(name of the post applied for) in Madha	abdev University.
	Signature:
Date:	(Head of the University/ Organization)
Place:	Name:
	Designation:
	Seal: