



ગુજરાત કેન્દ્રીય વિશ્વવિદ્યાલય  
**CENTRAL UNIVERSITY OF GUJARAT**  
( Established by an Act of Parliament of India, No 25 of 2009)

Sector - 29, Gandhinagar - 382 030,  
Ph. No.079 23977407, Fax: 079 23260076  
e-mail: [registrar@cug.ac.in](mailto:registrar@cug.ac.in), website: [www.cug.ac.in](http://www.cug.ac.in)

**Application Form for Non-Teaching Posts**

FOR OFFICE USE ONLY	
DIARY NO.	DATE:
Advertisement No. 19/2015-16	Date: 28/01/2016

Details of Payment

DD No.& Date	Bank & Branch	Amount

Paste your recent  
passport size  
photograph here

(with signature  
across the  
photograph)

Name of the post applied for .....

1. Name (in Full) .....  
First Middle Surname

2. Father's Name: .....

3. Mother's Name:.....

4. Date of Birth: Day.....Month.....Year.....

5. Age (as on the last date of application) ..... years..... months

6. Nationality.....

7. Marital Status : Married ☐ Unmarried ☐

8. Gender : Male ☐ Female ☐

9. Category: SC ☐ ST ☐ OBC ☐ General ☐ Ex-Serviceman ☐

10. Person with Disability (PWD) may indicate relevant particulars

Relevant Particulars:	If applicable, Write 'Yes'	Percentage of disability	Sr. No. of proof enclosed
a. Blindness or low vision:			
b. Hearing impairment			
c. Locomotor disability or cerebral palsy (including all cases of Orthopedically handicapped)			

11. Permanent address (with pin code)

.....  
.....  
.....

12. Address for correspondence (with pin code)

.....  
 .....  
 .....  
 Email:..... Ph :.....  
 Mobile:.....

13. Educational Qualifications

Examination	Board / University	Year of Passing	% of Marks/CGPA	Subject(s)
Matriculation (10 <sup>th</sup> )				
Higher Secondary / Intermediate (10+2)				
Bachelor's Degree				
Master's Degree				
Other(s)				

14. Technical Qualifications (if any)

Degree/Diploma/Training	Name of the Institute	Year of Passing	% of marks/CGPA	Subject(s)

15. Experience

Designation	Name of the Organization	Pay Scale/ Pay Band	Nature of Appointment	Period of Service		
				From	To	Total

16. Additional information, if any

.....  
 .....  
 .....  
 .....

I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated.

Place.....

Date.....

Signature of the Applicant

List of Enclosures

---

---

---

---

---

---

(The endorsement below is to be signed and forwarded by the Head of the Department/Employer in the case of the in-service candidates whether in permanent or temporary capacity and incase of application for the Deputation, failing which the application is liable to be rejected).

#### **ENDORSEMENT OF THE EMPLOYER**

Ref. No.....

Date.....

1. The application of \_\_\_\_\_ is hereby forwarded with the remarks that we have No objection to his/her application being considered by the Central University of Gujarat.
2. Certified that the information given by the applicant in this application form has been checked / verified and found to be correct with reference to her / his service records.
3. It is certified that no vigilance case is pending/contemplated against the applicant and applicant is clear from vigilance angle.
4. Integrity of the applicant is certified.
5. It is certified that no minor/major penalty has been imposed upon the applicant during the last 5 years/ a list of major/minor penalties imposed upon the officer during the last 5 years is enclosed herewith.
6. ACR dossier, original/attested photocopies of the ACRs of the applicant for the last 5 years are enclosed herewith.

**Signature of the Employer  
(with office seal)**

**Note: Tick mark (✓) wherever applicable**