



Aastha Polytechnic

Vill Bhagwanpur, Adhoya Road, Shahbad Distt. Yamuna Nagar (Haryana)

Ph .: 01732-325736 . Fax : 01732-264310

01732-287875,9354006363,9355006363

1. Post Applied forSubject.....
2. Name of the Applicant.....
(in capital letters)
 - (a) Date of Birth..... Birth Place.....
 - (b) Nationality.....Religion.....Sex.....
 - (c) Blood Group (e) Identification Marks
 - (d) PAN No..... Driving License No..... Passport No.....

PHOTOGRAPH

Candidate please enclose i .d. proof: (ration card /voter card/driving license/pan card/passport)

3. Present Postal Address (in block letters)
..... Pin Code.....
Phone..... Mobile No..... E-mail, if any.....
4. (a) Father's NameMother's Name.....
(b) Name of Husband/wife (if married)
- (c) Details of Family.....
5. Whether belongs to GEN/SC/ST/BC/OBC/PH.....
6. a) Present designation & name of employer (if employed).....
b) Grade and consolidated salary

Sr. No.	Exam. Passed	University/ Board	Name of the Institute	Year of Passing	%age of Marks & Division	Regular/Correspondence/Part time
1.	Matric					
2.	Sr.Sec					
3.	Graduation					
4.	Post Graduation					
5.	M.Phil					
6.	Ph.D.					
7.	Any other Exam.					

*Please attach photo copies of all certificates.

7. Topic of M.Phil Dissertation.....

8. Experience:

Employer's Name & Address	Duration			Nature of Duties	Emoluments & Scale etc.	Reason For Leaving
	From	To	Total Period			
Last employment						

9. Extra Curricular Activities (Sports, Social, Literary Activities, N.C.C./N.S.S.) etc.

Name of Activity	Level/Name of the Competition	Year	Position Achieved

10. Any other achievement you would like to

mention:.....

11. PLEASE STATE WHETHER YOU ARE PURSUING ANY COURSE OF STUDIES AT PRESENT ? IF YES, GIVE DETAILS:

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Please note that:

- (a) You will not be allowed to undertake any further studies during your employment without prior written permission of the competent authority.
- (b) You will not undertake any part-time job including coaching/tuition etc.
IF SELECTED, WHEN CAN YOU JOIN ?

:_____

SALARY ACCEPTABLE

:_____

NAME & ADDRESSES OF TWO REFERENCES, NOT RELATIVES:

I certify that the above information given by my is correct and complete to the best of my knowledge and belief. I shall be liable for any action under rules for misstatement of facts on my part.

Place: _____

Date : _____

(APPLICANT'S SIGNATURE)