Dr. Rajendra Prasad Central Agricultural University, Pusa-Samastipur-848125, Bihar

Please affix your latest passport size selfattested photograph

(Signature of the candidate)

Application Form

(To be filled in by the candidate)

Name of the applicant		
Post applied for		
Advertisement No.		
Item No.		
Demand Draft No. & Date of Issue	Name of the Issuing Bank	Amount of fee remitted

For Official Use Only

Date of receipt of the application

Checked by	Dealing Assistant	Section Officer

Remarks, if any

Dr. Rajendra Prasad Central Agricultural University, Pusa-Samastipur-848125, Bihar

Certificate of Verification by the Employer

- 2. Thereisnovigilance/disciplinary/criminalcasependingagainsthim/her.
- 3. Details of the Minor/Major penalties imposed during the last ten years, if any.
- 4. Certified that the work and conduct of Dr. /Shri. /Smt. /Km. is above average for the last five years.

The gist of AAR/ACR grading/ratings for the preceding five years are as follows:-

Year			
Grading/Rating by Reporting Officer			
Grading/Rating by Reviewing Officer			

Office File/Ref No.

Signature

Name

Designation with office seal

Office Seal Date

In service candidate should get the above endorsement signed by his/her present forwarding authority.

DR. RAJENDRA PRASAD CENTRAL AGRICULTURAL UNIVERSITY, PUSA SAMASTIPUR, BIHAR-848 125

Website: - <u>www.rpcau.ac.in</u>

Application Form

Paste your recent passport size Photograph here

1. Name of the post applied for..... Discipline Specialization.....

2. Personal Details:

a) Name (in capital letter)	First Name		Middl	e Name	Name Surna		
b) Date of Birth	Day	Month	Year	Age as on last date of advertisement		Age	Months
				auvert	isement		
c) Father's Name							
d) Mother's Name							
e) Nationality							
f) Gender	Male / Female						
g) Religion							
h) Community/Category	GEN/SC/ST/OBC/Other Categories If other categories give details						
i) Marital Status	Marrie	ed/Unmai	ried				
j) If physically disabled indicate the relevant particulars	If appl write	licability "Yes"					
k) Permanent Address with Pin Code:			L				
Email:							
Mobile							
Landline(with STD code)							

I)Present Add	lress with Pi	n Code									
for corresp											
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If yes, please sub	omit the follow	ings	Date of		Dat	te of		Date of Notific	ation	Sl.No	. of Proof
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if any											
Any other Exam	passed equival	ent to NET									
(SLET/SET etc.)											
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5. Specify the nature of experien	ce						
a) Teaching		No. of Years	No. of Month	s Sl. No. of proof enclosed			
i. Bachelor's Level							
ii. Masters' Level							
iii.Ph.D. Level							
b) Post –Doctoral: Teaching/Resea	rch						
c) Research Experience (RA, SRF or	Scientist only)						
d) Other Experience, if any							
 6. Publications (Refereed Journals), if any, in last five years (Mention here only numbers). The details of copies of reprint to be enclosed. Note: Research papers published in refereed journals will be considered for allocation of scores according to NAAS/UGC Journal rating applicable from 01.01.2017. 							
Authors, Year of publication, Title of the paper	Journal Name, Volu and Page No.	me NAA/U Journa	-	UGC For office use only			

Authors, Year of publication, Title of the paper	Journal Name, Volume and Page No.	NAA/UGC Journal Id	NAAS/UGC Rating	For office use only

Note: 1. No Score will be given if references are incomplete

2. UGC Score will be used only for those subjects whose journals are not listed in NAAS list.

7. Other publications (Enclose reprints of title page)

Category of publication	Name of publication	Authors	Year and Number of pages	Publisher	For office use only
Practical / Training Manual/ Books/ Monographs					
Book Chapters /					

Policy Papers/ Economic Reviews							
Popular Articles/ Bulletins/ Short Communications							
Papers in Proceedings							
8. Seminar/conferen	ces attended et	c. (Attach copies of	f cer	rtificate/proo	f)		
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. Organized				In India (No.)	In Abroad (No.)	Sl. No. of Proof enclosed	
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. Participated as Paper contributors/Presenter/Discussant							
Seminars/Conferences Training Programmes		nposiums/					
		Declarati	on:				
I Son/Daughter of hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or even after the selection, my candidature/appointment may stand cancelled.							
Signature of the Applicant							
					Name (in Block Letters)	
Date	(Application not signed by the candidate is liable to be rejected.)						