



Dr. Rajendra Prasad Central Agricultural University

Pusa, Samastipur, Bihar -848125

Please affix your
latest passport size
self-attested
photograph

Application Form **(To be filled by the candidate)**

Name of the Applicant		
Post Applied for		
Advertisement No.		
Post Code		
UTR No. & Date of Transaction (Copy of the payment receipt should be attached with the application form)	Name of the Bank from which Online payment has been made	Amount Paid

Candidate should pay the requisite fee via online banking online only i.e. through RTGS,NEFT,IMPS, etc. at the bank details mentioned in the advertisement.

(Signature of the candidate)

For Official Use Only

Date of receipt of the application

Checked by	Dealing Assistant	Section Officer /AR

Remarks, if any



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Endorsement by the EMPLOYER (for In-Service Applicants)

1. The entries made in in the application of Dr. / Sh. / Smt. / Km
.....for the post of
have been duly verified from the records and are found correct.

2. There is no vigilance/disciplinary/criminal case pending against him/her.

3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965 have been imposed during the last ten years on him / her - Yes / No.

If Yes give details.....

4. Certified that the work and conduct of Dr./Shri/Smt./Km.
is above average during the last five years.

The gist of AAR/ACR gradings/ratings for the preceding five years is 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 alongwith the application form or this particular page can be sent separately within 30 days from the last date of receiving of application form.



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1	Name (In Capital Letters)	First Name			Middle Name	Surname	
2	Date of birth	Day	Month	Year	Age as on last date of advertisement	Years	Months
3	Place of birth	City/Village			State	Country	
4	Mother's Name						
5	Father's Name						
6	Address	Correspondence			Permanent		
		City: District: State: Pin Code: Mobile: Email:				City: District: State: Pin Code: Mobile: Email:	
7	Nationality						
8	Sex	Male/ Female/Transgender: _____					
9	Community/ Category (Please strike out whichever options are not applicable)	UR/OBC/SC/ST/EWS: _____					
		S.No of Proof enclosed (if belongs to Reserved Category): _____					
10	Marital status	Married/Unmarried/Divorced: _____					
		If married, name of spouse _____					

11. Educational Qualifications (Attach additional pages, if required)

	Name of course	Name of the Board/ University	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)	Subjects studied	S. No. of proof of enclosure
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
10th Class / equivalent								
10+2/Higher Secondary/ equivalent								
Bachelor's degree								
Master's degree								
M.Phil. / Equivalent								
Ph.D								

Indicate whether Ph. D degree has been awarded : Yes/No (only regular basis)

If yes, please provide the following details:	Date of Registration	Date of Submission	Date of Notification	S.No. of Proof enclosed	
Whether NET UGC/CSIR/ASRB Fellowship, if any	Subject		Roll No.	Year	
Any other Exam passed equivalent to NET (SLET/SET etc.)					
Any other qualification	Name of Course/Subject		Roll No.	Year	Sl. No. of Proof of enclosure

12. Chronological list of Experience (starting from current position/ employment)

Designation	Name & address of employer	Period of Experience			Nature of work/ duties	Sl. No. of proof of enclosure
		From	To	No. of Years/ Months (As on last date of advertisement)		
(a)	(b)	(c)	(d)	(e)	(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

13. Nature of Experience

	No. of Years	No. of Months	No. of Days	Sl. No. of proof of enclosure
a) Teaching				
i. Post –Doctoral: Teaching/Research				
ii. Research Experience (RA, SRF or Scientist only)				
b) Administrative				
c) Other experience if any				
Total Experience				

* (Add separate sheet if required, to be annexed at relevant S.No.)

14. 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 latest rating applicable.

Authors, Year of publication, Title of the paper	Journal Name, Volume and Page No.	NAA/UGC Journal Id	NAAS/UGC Rating	Sl. No. of proof of enclosure

(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.)

15. Other publications

Category of publication	Name of publication	Authors	Year and Number of pages	Publisher	S. No. of proof of enclosure
Practical / Training Manual/ Books/ Monographs					
Book Chapters / Policy Papers/ Economic Reviews					
Popular Articles/ Bulletins/ Short					

Communications					
Papers in Proceedings					
16. Seminar/conferences attended etc.(Attach copies of certificate/proof)					
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. Organized	In India (No.)	In Abroad (No.)	S.No of Proof enclosed		
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. Participated as Paper contributors/Presenter/Discussant					
Seminars/Conferences/Workshops/Symposiums/ Training Programmes etc. Attended					

17. Have you ever been punished during your studies at College/University? (Yes/No) :
18. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
19. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No) :
20. Do you have any case pending against you in any court of law? (Yes/No) :
21. **Any other information/qualification relevant to the post applied for:**

22. Declaration

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 found false or incorrect or ineligibility being detected before or after the Selection Committee and Board of Management meetings, my candidature/appointment may be cancelled by the University.

I have never been convicted or contemplated for any unlawful activity.

Signature of the Applicant

*Name as signed (in BLOCK LETTER)

Date: _____

**Application not signed by the candidate is liable to be rejected*

Please tick the enclosures attached:

Sl.	Check List	Sl. No. of enclosure	No. of Sheets
1.	Matric/Secondary/High School (10 th Class) Marks Sheet		
2.	Matric/Secondary/High School (10 th Class) Certificate		
3.	Sr. Secondary/Intermediate (12 th Class) Marks Sheet		
4.	Sr. Secondary/Intermediate (12 th Class) School Certificate		
5.	Bachelor's Degree Final Year Marks Sheet		
6.	Bachelors' Degree		
7.	Master's Degree Final Year Marks Sheet		
8.	Master's Degree		
9.	M.Phil. or Equivalent		
10.	Ph.D		
11.	NET UGC/CSIR/ASRB Fellowship		
12.	Any other Exam passed equivalent to NET (SLET/SET etc.)		
13.	Any other Qualification		
14.	Caste Certificate issued by the Competent Authority		
15.	Experience Certificate(s) from previous employer(s)		
16.	Endorsement from the present employer		
17.	Online payment receipt for the application fee		
18.	Any other		

Total number of sheets enclosed_____ (please give sequential number to each sheet and signature with date).