

डॉ. राजेंद्र प्रसाद केंद्रीय कृषि विश्वविद्यालय Dr. Rajendra Prasad Central Agricultural University

पूसा समस्तीपुर बिहार -848125 Pusa, Samastipur, Bihar -848125

APPLICATION FORM FOR THE POST OF REGISTRAR/COMPTROLLER

| | (To be filled by applicant) | | | | | | | | |
|---|---|---------------|------------|------|--------|---------------------------|-----------|-------------------------|---|
| _ | oyment Notice No.: cation for the Post o | | | | | | | pa photog sign ac | e your recent issport size graph here and cross the photo that part of ire should be on form. |
| | que Transaction Reference No. | Date of trans | saction | | Amoun | it | Name of t | he Bank used | d for payment |
| | | | | | | | | | |
| 1 | Name | | First Na | me | | Mide | dle Name | Sur | name |
| | (In Capital Letters) |) | | | | | | | |
| 2 | D | Day | Mon | th | Year | Age as on last date of | | Years | Months |
| | Date of birth | | | | | | rtisement | | |
| 3 | Place of birth | | City/Ville | age | | • | State | Со | untry |
| 3 | Place of birtii | | | | | | | | |
| 4 | Mother's Name | | | | | | | | |
| 5 | Father's Name | | | | | | | | |
| | | | Corresp | ond | lence | | | Permanen | t |
| | | | | | | | | | |
| 6 | Address | | | | | | | | |
| | | Mobile: | | | | | Mobile: | | |
| | | Email: | | | | | Email: | | |
| 7 | Nationality | | | | | | | | |
| 8 | Sex | Male/ Fer | nale/Tra | nsge | ender: | | | | |

| 0 | Community/ Category | UR/OBC/SC/ST/EWS: | | |
|----|--|--|--|--|
| 9 | (Please strike out whichever options are not applicable) | Sl. No. of proof enclosed (if belongs to Reserved Category): | | |
| 10 | Marital status | Married/Unmarried/Divorced: | | |

11. Educational Qualifications (Attach additional pages, if required) % of Sl. No. **CGPA** Marks of Divisio (if grading Name of the (pl. Name of Year Subjects proof Board/ indicates is studied course passed of n applicableequivalen University enclos t to CGPA) ure also) (b) (a) (c) (d) (e) (f)*(g)* (h) 10th Class / equivalent 10+2/Higher Secondary/ equivalent Bachelor's degree Master's degree Ph.D/Doctoral Degree Sl. No. of **Proof of** Name of Course/Subject Roll No. Year enclosure Any other exams passed

| | | Per | riod of Expe | erience | | | |
|-------------|-------------------------------|------|--------------|---|---------------------------|---|--|
| Designation | Name & address of employer | From | То | No. of Years/ Months (As on last date of advertiseme nt) | Nature of work/ duties | Sl. No. of proof of enclosur e | |
| (a) | (b) | (c) | (d) | (e) | (f) | (g) | |
| | | | | | | | |

| 13. Nature of Experience | | | | | | | |
|----------------------------|--------------|---------------|-------------|----------------------------------|--|--|--|
| | No. of Years | No. of Months | No. of Days | Sl. No. of proof of enclosure | | | |
| a) Teaching | | | | | | | |
| b) Administrative | | | | | | | |
| c) Research | | | | | | | |
| d) Other experience if any | | | | | | | |
| Total Experience | | | | | | | |

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

| 15. Details of the training programme attended | | | | | | |
|--|------|--------------------|------------------------|--|--|--|
| Name of the Programme | Year | Duration (in days) | Organizing Institution | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| 16. Details of the Management Development Programmes attended | | | | | | |
|---|------|--------------------|------------------------|--|--|--|
| Name of the Programme | Year | Duration (in days) | Organizing Institution | | | |
| | | | | | | |
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| | L | 1 | | | | |

| 17. Details of the orientation programmes/training programmes/workshops | | | | | | |
|---|------|--------------------|------------------------|--|--|--|
| Name of the Programme | Year | Duration (in days) | Organizing Institution | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| 18. Details of the refresher programmes attended | | | | | | |
|--|------|--------------------|------------------------|--|--|--|
| Name of the Programme | Year | Duration (in days) | Organizing Institution | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| 19. Please provide details of two (02) referees (Not related to the candidate). At least one should be current superior. | | | | | | |
|--|-------------|---------|-------------|----------|--|--|
| Name of the referee | Designation | Address | Contact No. | Email ID | | |
| | | | | | | |
| | | | | | | |

- 20. Have you ever been punished during your studies at College/University? (Yes/No):
- 21. Have you ever been punished during your service or convicted by a court of law? (Yes/No):
- 22. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No):
- 23. Do you have any case pending against you in any court of law? (Yes/No) :

| 24. | Any other information/qualification relevant to the post applied for: | |
|------------|---|------|
| _ | | |
| | | |
| - | | |
| - | | |
| - | | |
| 25. Decla | aration | |
| | | |
| I, | son/daughter of here | eby |
| declare tl | nat all the statements and entries made in this application are true, complete and correct to the bes | t of |
| my know | ledge and belief. In the event of any information found false or incorrect or ineligibility being detec | ted |
| before or | after the Selection Committee and Board of Management meetings, my candidature/appointment model and and | nay |
| be cancel | led by the University. | |
| | | |
| I have no | ver been convicted or contemplated for any unlawful activity. | |
| i nave ne | ver been convicted of contemplated for any uniawful activity. | |
| | | |
| | | |
| | Signature of the Application | ant |
| | Signature of the Applica | anı |
| | | |
| | | |
| | *Name as signed (in BLOCK LETTE | R): |
| Date: | | |
| | | |
| | *Application not signed by the candidate is liable to be rejected | |
| | | |

| Certificate of Verification by the E | Employer | | | | |
|---|------------------|------------|-----------|--|--|
| | | | | | |
| 1. The entries made in application of Dr./ Sh./ Smt./ Kmhave been duly verified from the | | | | | |
| records and are found correct. | | | | | |
| 2. There is no vigilance/disciplinary/criminal case pending a | gainst him/he | er. | | | |
| 3. Whether any Minor/Major penalties under CCS (CCA) rule the last ten years on him / her - Yes / No. | s, 1965 have b | oeen impos | ed during | | |
| If Yes give details | | | | | |
| 4. Certified that the work and conduct of Dr./Shri/Smt./Km. above average during the last five years. | | | is | | |
| 5. The gist of AAR/ACR gradings/ratings for the preceding five | ve years is as f | follows: - | | | |
| Year → | | | | | |
| Grading/Rating by Reporting Officer → | | | | | |
| Grading/Rating by Reviewing Officer → | | | | | |
| Office File/ Ref. No | | | | | |
| | Signature: | | | | |
| | Name: | | | | |
| | Designatio | on: | | | |
| Office Seal | Date: | | | | |
| | | | | | |

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 (12thClass) Marks Sheet | | |
| 4. | Sr. Secondary/Intermediate (12thClass) 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. | Ph. D/Doctoral Degree | | |
| 10. | Any other Qualification | | |
| 11. | Caste Certificate issued by the Competent Authority | | |
| 12. | Experience Certificate(s) from previous employer(s) | | |
| 13. | Endorsement from the present employer | | |
| 14. | DD for the application fees (in original) | | |
| 15. | Any other | | |
| | | | |
| | | | |

| Total number of sheets enclosed | $_$ (please give sequential number to each sheet and signature |
|---------------------------------|---|
| with date). | |

(Signature of the Applicant)