

(FOR OFFICE USE ONLY)

Address : At/ Post _____ Taluka: _____ Dist: _____
Section : Higher Education/Professional Education /Technical Education
Name of the Post : Principal / Librarian /Assistant Professor

SC/ST/VJ(A)/NT(B)/NT(C)/NT(D)/SBC/OBC/SEBC/EWS/OPEN

Qualification:-



Affix your
latest photo

To,
The General Secretary
Mahatma Gandhi Vidyamandir
3rd Floor, S.P.H. College of Hotel Management
& Catering Technology, Mumbai -Agra Road,
Panchavati, Nashik- 422 003.

Sub: Application for the post of _____
in subject _____

Ref.: Your Advertisement published in daily _____ News paper
Dated : / /20

Respected Sir,

With reference to the above mentioned advertisement, I have the honour to submit herewith the application form for the post of _____ for your sympathetic consideration.

I am also giving herewith my complete bio-data, along with certified true copies of all necessary documents.

Thanking you,

Yours Faithfully,

(Signature of Candidate)

Date:- / / Full Name: Mr/Mrs. _____

(If in service send the application through the Principal of your college)

Name of the College:- _____

Ref. No.: _____ Date : / /20

PRINCIPAL

**Mahatma Gandhi Vidyamandir,
Panchavati, Nashik- 422 003.**

Personal Details of the Candidate

- 1) Name the candidate in full : Surname

(in BLOCK CAPITAL LETTERS) First Name

Father's/Husband Name
- 2) Permanent Address : At/Post : _____
Village : _____
Taluka : _____
Dist. : _____
Pin Code No. : _____
- 3) Address for correspondence : _____

- 4) Mobile:

E-mail:

Aadhar Card No.

PAN Card No.
- 5) Gender :
- 6) Date of Birth :

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Present Age :		
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Year Month
- 7) Birth Place : _____
- 8) Caste & Sub-Caste : _____
- 9) Caste Validity No. : _____
- 10) Employment Registration No. : _____ Employment Exchange : _____

1) Particulars of Educational Qualification :-

Sr. No.	Examination	Year of Passing	University or Board	Subject offered	Percentage of Marks %	Class Division obtained
1)	H.S.C.					
2)	UG-					
3)	PG-					
4)	Ph.D.					
5)	SET					
6)	NET					
7)						
8)						

2) Particulars of Experience :-

Name of the College	Date of Joining	Date of Leaving	Post held/ Designation	Total Salary	Reason for Leaving

I declare that the information given above is correct. I am solely responsible for false information furnished, If any.

ENCL:

Documents:

- | | | |
|----|----|----|
| 1) | 2) | 3) |
| 4) | 5) | 6) |
| 7) | 8) | 9) |

& others

Place :

(Signature of the Candidate)

Date: / /20

(Any other information)