

# GIDC Degree Engineering College

(Managed by GIDC Education Society)

Abrama, Ta: Jalalpore, Dist: Navsari - 396406

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#### APPLICATION FORM FOR NON TEACHING POST

Application f	For the Post of:			
Name of Disc	cipline:			
Advertisemen	nt No	Date		
PERSONAL	<u> DETAILS</u>			
1. Name:				
(In capital let	ters – Beginning with Sur	rname)		
2. Address:				
Present				•••••
	PIN CODE:			
	Phone No.:	. (STD Code) Mob	ile No.:	
D .	e-mail:			
Permanent				•••••
			• • • • • • • • • • • • • • • • • • • •	•••••
	PIN CODE:			
	Phone No.:	,		
	e-mail:			
3. Date and p	olace of Birth:			
4. State of Domicile:			5. Home Town	
6. Nearest Railway Station		7. Sex: M	5. Home Town 7. Sex: Male Female_ arried Widow (er) Mother Tongue * SEBC* Other	
8. Marital Status: Single		Married	Widow (e	r)
9. No. Of Children:		10. Mother 10ng	gue SERC*	Other
12. Present D	Designation:	51 ·	SEDC	Other
13. Present P	ay Scale:		Grade Pav	<del></del>
14. Personal	Marks of Identification:		<i></i>	
	Ex-Serviceman: Yes		No	

<sup>\*</sup>Please attach authenticated caste certificate.

16. Languages known:

Language	Speak	Read	Write
Language Proficiency			

17.	
(A) Nationality	_
(B) Citizenship at Birth	
(C) Present Citizenship	

## 18. Educational/Academic Qualifications:

[Attach certificate in sequence giving serial number]

Sr.	Name	of	Year	of	Name of	Final	Field	of
No	Examination		Passing	·	Board/University	Grade/	Specialization	
						Percentage	Major	Minor
1								
2								
3								
4								
5								
6								

### 19. EXPERIENCE: (EMPLOYMENT RECORD):

(Attach the certificate / order, if any giving serial number)

Sr. No	Period		Post or position held	Employers Name and Address	Salary drawn with Grade Pay of Scale of Pay	Reason of Leaving Service
	From	То				
					_	
					_	

20. References:		
1. Name:		
Designation:	Organization:	
Postal Address:		
Phone No. with STD Code No.: _		
Mobile No.:		
Fax No., if any:		
2. Name:		
Designation:	Organization:	
e-mail id:		
Phone No. with STD Code No.: _	<del></del>	
Mobile No.:	<del></del>	
Fax No., if any:		
3. Name:		
	Organization:	
e-mail id:		
Phone No. with STD Code No.: _		
Mobile No.:		
Fax No., if any:		
I, hereby declare that the informat knowledge and belief and also that information regarding my past ser incorrect or anything is found to h	ARATION BY THE CANDIDATES tion furnished above is true and correct to the bes at, I have not concealed any fact or withheld any rvice and record. If any information is found to be have been concealed, I will be disqualified for selection without any notice or compensation.	e false or
Place :	(Signature of Applican	it)

### **DETAILS OF ENCLOSURES**

1.

2.

4.

6.

7.

8.

9.

10.

11.

12.

13.

14.