



Institute of Ayurvedic Pharmaceutical Sciences
Gujarat Ayurved University, Jamnagar
Gujarat - 361 008

0288-2555746, www.iaps.ac.in, iaps@ayurveduniversity.com

(To be filled in by the Candidate)

Photograph
self attested

Application for the Post of : _____

Advertisement Reference & Date : _____

[1] (A) Name in full (in Block Capitals- Surname First)

Shri/Smt./Kum. : _____

(B) Maiden Name /
Changed Name : _____
(If any)

(To be supported with Government Gazette Notification)

Phone No. : _____ Mobile : _____

E-mail : _____ Fax No.: _____

[2] Full Address (in Block Capitals)

(1) Present : _____

(2) Permanent : _____
address

Details of residence with complete address for the last five years.

[3] Nationality : _____

[4] Date of Birth : _____ Age : _____ years.
(To be supported with a copy of S.S.C. Certificate)

[5] Sex (M / F) : _____

[6] Do you belong to a Scheduled Caste or
Scheduled Tribe ? : _____

(If Yes, attach a certificate from an Executive Magistrate or a Social Welfare Officer supported by caste / tribe validity certificate)

[7] Do you belong to Socially &
Educationally Back-ward Class/OBC ? : _____

(If so, attach a certificate from the competent authority with caste validity certificate for socially back ward class and non creamy layer certificate)

[8] Father's full Name

(Surname First) : _____

Address : _____

Occupation : _____
(if dead, state the last address and occupation before death)

[9] (A) Are you Married ? : _____

(B) Name of Wife / Husband : _____

[10] Registration No. of Council / : _____
Board (If applicable)

[11] Languages known & mother tongue :

Name of the Language	State whether you can			
	Read	Speak	Write	Exam. Passed

- [12] **QUALIFICATIONS** :
 Particulars of examinations passed, in chronological order from S.S.C. or equivalent exam.
 Note :- Self attested true copies to be attached.

Board, University etc.	Name of Examination or Degree	Class or Division	Subjects		Year of Pass- ing	Number of attempts	Per cen tage (%)
			Principle or Major	Subsidiary or Minor			

- [13] **RESEARCH WORK / PUBLICATIONS** :
 (Enclose details as Annexure)

[15] Did you apply for any post advertised by the Gujarat Ayurved University in the past ?
If Yes, state

Sr. No.	Post applied	Application Date	Interview Held	Selected / Rejected

[16] Are you willing to accept the minimum initial pay ? If not, what is the lowest initial pay that you will accept ? :

[17] If appointed, how much time you need for joining ? :

[18] (A) Any departmental inquiry or legal proceedings is pending, give the details. :

(In any court or police department regulatory councils)

(B) Details of penalty / punishment in the past if any. :

[19] Give two references of reputed personalities with name & addresses to whom you are known.

(1) Name : _____ (2) Name : _____

Address : _____ Address : _____

Phone.No. : _____ Phone No. : _____

Mobile : _____ Mobile : _____

E-mail : _____ E-mail : _____

Fax No.: _____ Fax No.: _____

[20] Additional remarks if any :-

[21] List of Self attested copies of certificates / documents attached.

- | | |
|-----|------|
| (1) | (7) |
| (2) | (8) |
| (3) | (9) |
| (4) | (10) |
| (5) | (11) |
| (6) | (12) |

[22] Demand Draft No. _____ Date _____ of Rs. _____
Name of Bank _____ Place _____

DECLARATION

- (1) I have carefully read the "Instructions to the candidates and particulars of advertisements" supplied to me by the University. The information given by me in this application form is true & complete to the best of my knowledge.
- (2) I have not married for second time in the existence of my first wife (For male candidate)
- (3) I have not married to an already married person who is undivorced / not widower. (For female candidate)

Place :- _____

Signature of the Candidate

Date :- _____

Submitted through proper channel.

Seal / Signature of the Employer

I will submit N.O.C. from my employer at the time of interview. (If applicable)

Signature of the Candidate

IMPORTANT INSTRUCTION

- (1) Subject wise separate application will be essential in the prescribed proforma.
 - (2) Incomplete information may lead to rejection of the application. (No column or row should be left blank. Write N.A. when not applicable.)
 - (3) Furnishing of false information or suppression of any factual information would be a disqualification.
 - (4) Employed candidates are required to submit Application Form through proper channel or NOC from employer.
 - (5) Canvassing in any manner will be disqualification.
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(FOR OFFICE USE ONLY)

WHETHER ELIGIBLE BY:

- [1] Submitted through proper channel ? / NOC --- _____
- [2] Caste certificate produced ? --- _____
- [3] All other requisite certificates produced ? --- _____
- [4] Application fee paid ? --- _____
- [5-A] Age ? --- _____
- [5-B] Essential educational qualifications --- _____
- [5-C] Possession of requisite experience --- _____

(To be indicated clearly whether eligible or not)

Overall eligibility :- _____

Application - (Accepted / Rejected) :- _____

SIGNATURE OF SCRUTINY COMMITTEE :-

1. _____ 2. _____ 3. _____

4. _____