

गति शक्ति विश्वविद्यालय
GATI SHAKTI VISHWAVIDYALAYA
(A Central University under the Ministry of Railways, Government of India)
लालबाग, वडोदरा, गुजरात / Lalbaug, Vadodara, Gujarat 390004

APPLICATION FOR THE POSITION OF CONSULTANT- ADMIN/SERVICES

Candidate's
photograph, duly
self attested

Advt. No _____ Date _____

GENERAL INFORMATION:

1. (i) Name in Full :
- (ii) If married, maiden name :
2. Father's/Husband's Name:.....
3. Date of Birth : Date.....Month.....Year.....
(As recorded in Matriculation or equivalent certificate)
4. Age (as on the last date for receiving of application):years.....monthsdays
5. Nationality :
6. Marital Status : Married / Unmarried
7. Sex : Male / Female / TG
8. (a) Category : ST/SC/OBC/EWS. If any other, specify.....
(b) Sub category: PWD(OH/VH/HI)/Ex-Serviceman/Sports. If any other, specify.....

9. PERMANENT ADDRESS:

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 District.....State.....PIN.....

10. ADDRESS FOR CORRESPONDENCE:

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 District.....State.....PIN.....
 Land-line Phone.: Mobile Email

11. EDUCATIONAL QUALIFICATIONS [*] (from Matriculation onwards):

Examination	Board / University	Year of Passing	Marks			Class/ Grade	Subject(s)
			Obtained	Out of	% of Marks		
Matriculation (10 th)							
Higher Secondary / Intermediate (12 th)							
Diploma/ Bachelor's Degree							
Any other Bachelor's Degree							
Master's Degree							
M. Phil./Ph. D.							
Technical Qualifications (if any)							
Computer Qualifications							
Any other Qualification							

12. PROFESSIONAL EXPERIENCE (Starting from the latest):

Designation	Name of the Organization/ in case of non-Govt. pl specify.	Basic pay (Pay in pay band+ grade pay)/Pay Band/if any other scale, pl specify clearly.	Nature of Appointment Regular/ Permanent/ Temp./on contract/ Adhoc	Period of Service		
				From	To	Period

13. Any other relevant experience

Designation	Name of the Institution	Basic pay (Pay in pay band+ grade pay)/Pay Band/if any other scale, pl specify clearly.	Nature of Appointment Regular/ Permanent/ Temp./on contract/ Adhoc	Period of Service		
				From	To	Period

14. ADDITIONAL INFORMATION, IF ANY:

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15. I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated. I have enclosed attested copies of the supporting documents in a single pdf.

Place.....

Date.....

Signature of the Applicant

(Encl: As above)

ATTACH YOUR DETAILED CV WITH THE MAIL, ALONG WITH THIS APPLICATION FILLED AND SIGNED.
