



DR. BABASAHEB AMBEDKAR OPEN UNIVERSITY

(Established by Government of Gujarat)

“Jyotirmay Parisar”

Sarkhej - Gandhinagar Highway, Chharodi, Ahmedabad-382 481

Website: www.baou.edu.in

Advertisement Date: 20/01/2018.

For Office use

Application received date, Signature

Name of the post applied for: _____

Online Registration Number _____

Processing fee (Non-Refundable) for SC, ST, D.A. (Physical Handicapped) - Rs.250, for other applicants - Rs.500
(Processing Fee to be paid through Demand Draft Only)

Application form (Last date of receipt of the application form online Dt. 20/02/2017 and hard copy Dt. 27/02/2018)

(Note: Use a separate application form for each post. Application forms must be filled up by one's own handwriting. Filled up applications must be sent by Regd. A.D. only)

Please affix your recent passport size colour Photograph & sign across

1. Name of applicant _____
(Surname) (Name) (Father's/Husband's Name)

2. Address:-

(1) For correspondence:

(2) Permanent Address

PIN:- _____ Ph: _____ PIN:- _____ Ph: _____

3. Mobile Number: _____

4. E-mail: _____

5. Mother tongue: _____ 6. Nationality: _____

7. Date of Birth: _____ Age as on Dt. 20-01-2018 : Year _____ Month _____

8. Category:- (Attach latest recognized certificate for the reserved candidates)

SC [] ST [] SEBC [] D.A.(Physical Handicapped) [] General []

9. Proficiency in language:

	<u>Language</u>	<u>Writing</u>	<u>Reading</u>	<u>Speaking</u>
(1)	<u>Gujarati</u>	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____

10. Educational Qualifications: (from S.S.C.)

Examination	Board / University	Year of passing	Marks/Grade, Percentage	Main subject	Remarks
S.S.C.					
H.S.C.					
Graduation: Degree : _____ 1 st Year 2 nd Year 3 rd Year					
Post-Graduation Degree : _____ 1 st Year 2 nd Year					
M. Phil.					
Ph.D.					

11. Other educational achievements: (Award, Prize, Medal, etc.)

12. Proficiency in Computer (Give details)

13. Details of UGC/CSIR or similarly recognized / NET/ SLET exam, if passed.

Year of examination passed: _____ Regn. No. _____

14. Details of experience: (Kindly fill up the table)

Name of the Institution	Designation	Pay scale and basic pay as on application date, Grade Pay	Duration

15. Experience Teaching / Administration as on Dt.20/01/2018 :

- (a) Graduation Level - Year _____
- (b) Post-graduation Level - Year _____
- (c) Research/Extension - Year _____
- (d) M.Phil./Ph.D. guidance - Year _____

16. Details of Publication and Research work:

S. No.	Title	Year of publication	Publisher	ISBN / ISSN No.	Author/Co author

(Please use separate sheet if needed)

17. Details of Seminar / Workshop / Orientation / Refresher Course:

S. No.	Name of Institution	Programme	Duration	Whether paper submitted	Category State/ National/ International

(Please use separate sheet if needed)

18. Please give name, address and contact number of two persons for reference.

(1) _____ (2) _____

19. Details of attachments: (Attach self-attested Xerox copies)

- (1) Proof of Date of Birth.
- (2) Processing fees DD No.: _____ Bank Name: _____
- (3) Latest Certificate of SC/ST/SEBC/Handicapped
 Certificate No. _____ Date of Issue of Certificate _____
- (4) Proofs of Educational qualifications
- (5) Experience certificates – If your teaching experience is in a Self Finance Institution, please submit copy of approval of your appointment / profile of the concerned University.
- (6) NET / SLET examination pass certificate
- (7) Details of guidance to M.Phil./Ph.D. category students.
- (8) M.Phil. / Ph.D., Thesis, Titles of Publications.
- (9) Details of Seminars / Workshops / Orientation programme / Refresher Course.

- (10) For position of Associate Professor: Mandatory requirement API Score sheet as per latest UGC norms.
 - (11) Others.
20. Other information.

CERTIFICATE

I hereby declare that the information provided by me in the application form is true according to my knowledge and belief. I have not given any wrong or incomplete information. I know that in case of any false information found on my part after my appointment, my service is liable to be terminated without any notice.

I affirm that there is no criminal case/civil case or warrant or departmental proceedings pending against me in any court of law. If any departmental proceedings or civil or criminal case found against me I will be responsible for that, in that case, I know that, my service is liable to be terminated without any notice.

I have read the instructions given along with the application form and understood the same and I am abide by it.

Date _____
 Place _____

 (Signature of the applicant)

(For use of Applicants in Employment)

Forwarded with the remarks that the above statements made by the applicant are correct to the best of my knowledge and belief, and this institution / organization has no objection to the candidature of the applicant being considered for the post applied for.

Date: _____ (Signature) _____
 Place: _____ Head of the Institution

Designation _____
 Address _____

Mobile No. _____