



VASANTA COLLEGE FOR WOMEN
वसंत महिला महाविद्यालय
Admitted to the Privileges of Banaras Hindu University
Krishnamurti Foundation India, Rajghat Fort, Varanasi - 221 001

Estd: 1913

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APPLICATION FORM FOR NON-TEACHING POST

Advertisement No. _____ Date _____							
Post applied for _____							
Department _____							
If applying for more than one posts, give details _____							
(For office use only)			Details of fee payment :			<div style="border: 1px solid black; padding: 5px; text-align: center;">Paste your recent passport size photograph here and sign across the photo so that part of signature should be on form</div>	
Registration Number _____			DD No. _____				
No. of Enclosures Claimed _____			Dated _____				
Attached _____			Amount _____				
(Signature) _____			Bank Name _____				
Branch _____							
1	Name (In Capital Letters)						
2	Date of birth	Day	Month	Year	Age as on last date of receiving of the Application	Years	Months
3	Place of birth	City/Village		State	Country		
4	Father's Name						
5	Mother's Name						
6	Nationality						
7	Gender		Male/ Female/Transgender				
8	Community/ Category (Please strike out whichever options are not applicable)		SC/ST/OBC/Other categories give details _____ S. No. of proof enclosed _____				
9	Marital status (Please strike out whichever options are not applicable)		Married / Unmarried/ Divorce Name of spouse _____				
10	If differently abled, indicate the relevant particulars			Yes/ No	Percentage of disability	S. No. of proof of enclosure	
a. Blindness or low vision:							
b. Hearing impairment							
c. Locomotor disability or cerebral palsy (includes all cases of Orthopaedically handicapped)							

11. Address for correspondence

(a) Mailing address _____ (b) Permanent address _____

(c) E-mail _____ (d) Mobile/Telephone _____

12. Educational Qualifications (Attach additional pages, if required)

	Name of course	Name of the Board/ University	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicate equivalent to CGPA also)	Subjects studied	S. No. of proof of enclosure
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
10th Class / equivalent								
10+2/Higher Secondary equivalent								
Bachelor's degree								
Master's degree								
Any Others								

13. Chronological list of experience (starting from current position/ employment)

Designation	Scale of pay & present Basic & AGP	Name & address of employers	Period of Experience			Nature of work/ duties	S. No. of proof of enclosure
			From date	To date	No. of years/ months		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)

* (Add separate sheet if required, to be annexed at relevant S. No.)

14. Details of Computer Course			S. No. of proof of enclosure
Name of the Course	Name of the Institution	Duration	

* (Add separate sheet if required, to be annexed at relevant S. No.)

15. Names and complete postal addresses of 3 referees (The referee should be the last employers of the candidate or any other person having know-how of candidate's experience/ knowledge and should not be related to the applicant)			
	Referee-1	Referee-2	Referee-3
Names, Designation & complete postal address			
Email:			
Phone (Landline) with STD code			
Mobile No.:			
Fax:			

List of self attested testimonials attached (original to be produced at the time of interview)

S. No.	Check List	S. No. of enclosure	No. of sheets
i.	10th Class / equivalent mark sheet/ certificate		
ii.	10+2/Higher Secondary equivalent mark sheet / certificate		
iii.	Bachelor's degree mark sheet/ certificate		
iv.	Master's degree mark sheet/ certificate		
v.	Caste Certificate issued by the Competent Authority (OBC/SC/ST/etc)		
vi.	Experience certificates		
vii.	No Objection Certificate		
viii.	Disability Certificate issued by competent Authority		
ix.			

Total number of sheets enclosed _____ (please give sequential number to each sheet and signature with date).

16. Have you been reprimanded ever Yes/No

Give detail if yes _____

17. Any other information/ qualification relevant to the post applied for:

18. Declaration

I, _____ son/ daughter of _____ hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected before or after the Selection Committee and Management meetings, my candidature/ appointment may be cancelled by the College.

I have never been convicted or contemplated for any unlawful activity.

Signature of the Applicant*

Date : _____ *Application not signed by the candidate is liable to be rejected

19. Endorsement by the EMPLOYER

- a) In case of in-service candidates in Government/ Semi-Government organizations/ Public Sector Undertakings / Autonomous Organizations, **the endorsement form must be signed by the employer.**
b) In case of in-service candidates from Private Sector, acceptance of resignation and relieving letter from the employer must be submitted at the time of joining.

अप्य दीपो भव

Forwarded to the Manager, Vasanta College for Women, Varanasi-221001

The applicant Dr./Mr./Mrs/Ms. _____ who has submitted this application for the post of _____ in Vasanta College for Women, Varanasi, has been in employment in a temporary/ contract/ permanent capacity with effect from _____ in the Scale of Pay of Rs. _____. He/She is drawing a basic pay of Rs. _____. His/ Her next increment is due on _____

Further, it is certified that no disciplinary/ vigilance case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by **the Vasanta College for Women** and in the event of selection, he/she will be relieved to join **Vasanta College for Women, Varanasi** as per rules.

Signature of the forwarding officer

Name : _____

Designation: _____

Place: _____

Date: _____