

 **Centre for Research in Rural and Industrial Development (CRRID)**

**Sector 19-A, Madhya Marg, Chandigarh 160019**

**Application Proforma for the Post of Assistant Librarian**

**(Filled up proforma may be sent by registered or speed post)**

**Personal Information**

|  |  |
| --- | --- |
| Name : | Marital Status : |
| Father's Name : | Gender :  |
| Mother's Name :  | Email :  |
| Date of Birth : | Mobile No :  |
| Applicant’s Category :(latest certificate required) | State to which belongs (Imp) :  |

Postal Address:

Permanent Address :

1. PROFESSIONAL INFORMATION:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Degree /Diploma/Certificate/Class | Degree | Mode of Study (regular/distance) | Board / University | Grade /CGPA / Division | Percentage(%) | Year ofPassing | Subjects |
| Graduation |  |  |  |  |  |  |  |
| Post Graduation |  |  |  |  |  |  |  |
| B. Lib.  |  |  |  |  |  |  |  |
| M. Lib. |  |  |  |  |  |  |  |
| M.Phil. |  |  |  |  |  |  |  |
| Ph.D. Awarded |  |  |  |  |  |  |  |

 Score: \_\_\_\_\_\_\_\_\_\_\_\_

*(For official use only)*

1. (i) If passed UGC NET Examination: Year \_\_\_\_\_\_ Subject\_\_\_\_\_\_\_\_

(ii) If passed UGC NET with JRF: Year \_\_\_\_\_\_ Subject\_\_\_\_\_\_\_\_

(iii) If passed SLET/SET: Year \_\_\_\_\_\_ Subject\_\_\_\_\_\_\_\_

 State whose SLET/SET passed (Compulsory) \_\_\_\_\_\_\_\_\_

Score: \_\_\_\_\_\_\_\_\_\_\_\_

*(For official use only)*

1. RESEARCH PUBLICATIONS:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Author | Title of the Paper | Journal's Name& Place ofPublication | ISSN | Vol./Page No/Year | If UGC listed, then the journal number | If peer reviewed supply evidence  |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Note: Information under column 6 or 7 is compulsory. Score: \_\_\_\_\_\_\_\_\_\_\_\_

*(For official use only)*

1. (a) EXPERIENCE:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Designation | Scale ofPay | Name & address of Org. | Period of Experience | Nature Of Work |
| From Date | To Date | No. ofYears/Months(as on last date of online form) |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Total  | Years |  |  | Days |  |
|  |  |

Note: Certificate from the competent authority/ies is required at the time of interview.

4 (b) POST DOCTORAL EXPERIENCE:

|  |
| --- |
| 1. Institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) Nature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(iii) Remuneration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (iv) from date\_\_\_\_\_\_\_\_\_ to Date \_\_\_\_\_\_\_  |

Note: Experience certificate/s in respect of 4 (a) and 4 (b) from the competent authority are required to be produced at the time of interview.

Score: \_\_\_\_\_\_\_\_\_\_\_\_

*(For official use only)*

1. AWARDS:

|  |  |
| --- | --- |
| 1. International/National Level

(Awards given by International organizations/Government of India/Government of India recognized national level Bodies) |  |
| 1. State-level

(Awards given by State Government) |  |

Note: Produce document at the time of interview.

Score: \_\_\_\_\_\_\_\_\_\_\_\_

*(For official use only)*

Date: \_\_\_\_\_\_

(Signature of the candidate)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note:

1. For the claims submitted, including in the application, the candidates themselves shall be solely responsible.
2. Claims not supported by the duly signed documents/evidence shall not be entertained.
3. All the documents, in-original, or required to be produced at the time of interview.

**No Objection Certificate from present employer/Vigilance clearance**

(Applicable for those currently employed)

Please indicate if NOC is not available: Yes/No

Forwarded with the remarks that the facts stated in the above application have been verified and found correct and this Institution/Organization has no objection to the candidature of the applicant being considered for the post applied for. No departmental disciplinary proceedings are pending or contemplated against him/her.

Name of Head of Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature & Seal of Head of Institution \_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declaration**

By signing and submitting this form, I attest to the validity of the information provided in this form. If any information is found to be incorrect, my candidature is liable to be cancelled and that I may be subject to legal/disciplinary proceedings.

I shall produce all the original testimonials/documents/certificate/Photo-id at the time of interview.

I shall produce the No Objection Certificate before/at the time of interview.

Date: Applicant’s signature