



ASSAM SKILL UNIVERSITY
APPLICATION PRO-FORMA FOR NON- TEACHING POSITION
(Direct Recruitment)

Please Paste
your recent
passport size
photograph and
sign across.

ADVERTISEMENT NO. & DATE: ASDM/ASUP/122/2023/410/134, Dated
Guwahati the 28th November 2024.

POST NO.:

NAME OF THE POST APPLIED FOR:

**Candidates applying for Junior Assistant post
only must specify their preference (Please tick):**

| | |
|--------------------|---|
| Regular | 1 st Preference / 2 nd Preference |
| Contractual | 1 st Preference / 2 nd Preference |

1. Name of Candidate (in **BLOCK** letter): _____

2. Father's Name: _____

3. Mother's Name: _____

4. Date of Birth (dd/mm/yyyy): _____

(Attested copy of 10th standard Certificate to be enclosed as a proof of the age)

5. Nationality: _____ Caste (General/OBC/SC/ST) _____

6. Gender: _____ Married/Unmarried: _____

7. Age as on 01.07.2024-

8. Contact No-

9. Email ID-

10. Address:

(a) Correspondence Address:

(b) Permanent Address:

Contact No. _____

Contact No. _____

11 Category applied for (Please Tick)

| | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| UR | SC | ST | OBC | PWD | EWS |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(please enclose certificate):

12. Particulars of all examinations passed, all degrees and technical qualifications obtained at a university or higher technical institutions of learning, commencing with High School Leaving (10th standard) / Matriculation examination. Please attach photocopies of certificates and mark sheets. keep adding this section as per requirement

| Sl. No. | Name of School/ College/ Institute | Name of the Board / University | Degree / Diploma passed / obtained | Distinction / Class / Division | Subject (mention field of specialization / major, if any) | % of Marks obtained | Date of passing |
|---------|------------------------------------|--------------------------------|------------------------------------|--------------------------------|---|---------------------|-----------------|
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13. Details of past services (please start from the latest employment record, keep adding this section as per requirement. Also enclose supporting documents):

| Sl. No | Name of the Organization /Institution | Position Held | Nature of duties/ work | Date of Joining | Date of Leaving | Length of Service | Pay Scale | Temporary/ Contract/ Fixed Term/ Permanent/ Ad-Hoc | Additional Remarks (if any) |
|-------------------------|---------------------------------------|---------------|------------------------|-----------------|-----------------|-------------------|-----------|--|-----------------------------|
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| Total length of service | | | | | | | | | |

14. Present position held with date :

15. Present Pay Band, Band Pay and AGP/GP :

16. Effective date of present Pay Band, Band Pay and AGP/GP :

17. Name of the employer, with address:

PIN : Contact phone no. Email id :

18. Please enclose photocopies of documents, as appropriate:

| | | | | |
|---------------------------------------|----------|----------|---------|---------|
| Training and Publications (if any) | | | | |
| Computer knowledge/ Software Packages | | | | |
| Languages | Language | Speaking | Reading | Writing |
| | | | | |
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| | | | | |

19. Names of two referees not related to the applicant:

Name:

Dept./ Designation:

Address:

PIN:

Contact No.:

Email id:

Name:

Dept./ Designation:

Address:

PIN:

Contact No.:

Email id:

20. Any additional information that the candidate may wish to provide (Attach additional sheet if necessary)

.....

21. Declaration:

I hereby declare that I have carefully read and understood the instructions and regulations referred here in and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case any of the information is found to be incorrect at any stage.

Signature of the applicant:.....

Date:.....

Name in full:.....

Place:.....

Designation/Department:.....

LIST OF ENCLOSURES

Details of certificates and other necessary documents submitted with the application form, with page no:

| Sl. No. | Particulars of certificate/ document enclosed | Page No. |
|---------|---|----------|
| 1. | | |
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Signature of the applicant:.....

Date:

NO OBJECTION CERTIFICATE

This is to certify that _____ (Name of the institution/ organization) has no objection if Dr./ Shri./ Smt. _____
Designation _____, Department/ Center _____
_____ of this institution/ organization applies for the position of _____ (Name of the Post applied for) in Assam Skill University, Mangaldoi, Darrang. He/ She will be relieved by the institution/ organization, incase of his/ her selection to the said post.

Head of the Institution/ organization:

Signature with seal of Institution/ organization:

Date: