DNS- REGIONAL INSTITUTE OF CO-OPERATIVE MANAGEMENT
Shastri Nagar, Patna, Bihar-800023

Self-attested photograph

APPLICATION FORM FOR ENGAGEMENT OF LECTURER

(On Contract)

1.	Full Name in Block Letter	:
2.	Father's Name	:
3.	Date of Birth (DD/MM/YYYY)	:
4.	Mobile No.	:
5.	Email id.	:
6.	Gender (Male/ Female)	:
7.	Category (General/ OBC/ST/SC)	:
8.	Postal Address (in Block Letter)	
9.	Permanent Address (in Block Letter)	
10.	Domicile	:
11.	Nationality	:
12.	Educational Qualification including NET/ Ph.D.	

	Sr. No.	Qualification	University/ Institute	Year of passing	% of Marks

13.	Work Experience					
	Sr. No.	Organisation/ Institute	Period		Nature of Work	Post Held
			From	To		
14.	Details of Computer Knowledge					
15.	Reference	(i)				
		(ii)				

Note: All the information must be filled in carefully and completely.

DECLARATION

I hereby declare the particulars furnished above are true and correct to the best of my knowledge and belief. In case any information furnished by me is found false or suppression of any information. I may be terminated and if required legal action may be taken. I have read this circular and accept all the terms and conditions for engagement to the post applied for by me.

Date: …….. **Signature of Applicant**