

## Educational Multimedia Research Centre

(An Institution of CEC-UGC on Electronic Media)

St. Xavier's College (Autonomous), Kolkata

30 Mother Teresa Sarani, Kolkata – 700 016

*Application No.*

*(for Office use only)*

Affix a recent passport  
size colour photograph  
with self-attestation

### Application Form

(Please read the Instructions & Guidelines before filling the form)

Advertisement No.....

<b>Post Applied for:</b>	
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Personal details (in capitals)							
1.	Full Name: (in block letters)						
2(a)	Father's Name:						
2(b)	Mother's Name:						
3.	Nationality:						
4.	Gender: (Male/Female)						
5.	Date of Birth:						
6.	Age as on the last date of submission of application	Years:		Months:		Days:	
7.	Category: (SC/ ST / OBC / PWD / Gen)						
8.	Whether Physically Challenged (If yes, please specify with relevant certificate)						

9.	Marital Status:	
10.	Permanent Address:	
11.	Full address for Correspondence: (with PIN code)	
	Tel. No.	
	Mobile No.	
	E-Mail	

12.	<b>Educational Qualifications (Matriculation onwards):</b>				
Name of the Exam	Board/University	Year of Passing	% of marks	Division/ Class/ GPA	Subjects
Please use an additional sheet, if required, retaining the above tabular format.					

13.	<b>Experience (Enclose additional sheet, if required, in the same format):</b>				
Organisation	Post held (permanent/ temporary) Basic Pay and Pay Band with Grade Pay	Nature of Work	Period		No. of Years/ months
			From	To	

14.	<b>Languages Known:</b>				
	Language	Speak	Read	Write	Examination Passed (if any)

15.	<b>Present position:</b>	
a.	Designation along with nature of appointment	
b.	Present pay scale & other details:	
c.	Pay Band + GP:	
d.	Present basic pay:	
e.	Total Emoluments: (Including DA, HRA, TA etc.)	
f.	Date of next increment:	

16.	<b>Are you willing to accept the minimum pay? If not, what initial pay do you expect? Give reasons justifying your request.</b>

17.	<b>If appointed, how much time will you need for joining the Institution?</b>

18.	<b>Any other relevant information you wish to furnish:</b>

Please use an additional sheet, if required, retaining the above tabular format.

20.	<b>Referees: Give below the names of two referees holding responsible position and should not be a relative of the candidate. One of the referees should be his/her present or recent employer.</b>	
	Name	Address, Phone No. and E-mail ID
1.		
2.		

**DECLARATION**

I declare that all the entries made in the application are true to the best of my knowledge and belief, and that I have not suppressed or misrepresented any information which may disqualify my candidature.

Date\_\_\_\_\_

Signature of the applicant

**ENDORSEMENT OF THE FORWARDING AUTHORITY**

Mr./Mrs./Miss/Dr. \_\_\_\_\_ Designation \_\_\_\_\_ has been  
working in a temporary/permanent capacity with effect from \_\_\_\_\_. His/her Pay band + Grade  
Pay is \_\_\_\_\_. He/she is drawing a basic pay of Rs.  
\_\_\_\_\_. His/her next increment is due on \_\_\_\_\_.

It is certified that no disciplinary / vigilance case has ever been held or contemplated or pending  
against him/her.

Signature:

Name:

Designation:

Date:

Seal of the Office: