



SHRI VISHWAKARMA SKILL UNIVERSITY

(State University enacted under the Government of Haryana Act 25, 2016)

APPLICATION FORM FOR UNIVERSITY LIBRARIAN

FOR OFFICE USE ONLY	
Application No:	PASTE HERE A SIGNED COPY OF YOUR RECENT PASSPORT SIZE PHOTOGRAPH
Received on (date):	
Total no. of pages received:	
Name & Sign. of dealing official:	

NOTE:

- i. The application form should be filled in properly and completely.
- ii. Self-attested copies of all Certificates/Testimonials should be attached with the original application form only. Originals will have to be shown at the time of the interview.
- iii. The application should be accompanied by the Bank Draft of the prescribed application fee for their respective category.
- iv. Persons in employment should send their applications through their employer. They may however, send a copy in advance, but it must be on the prescribed form and accompanied by prescribed application fee, copies of certificate/testimonials etc.
- v. Only eligible candidates should apply for the position/Post (Candidate must be eligible on the last date of submission of Application Form).
- vi. Use separate form for each position/post.
- vii. Prescribed qualification and instructions may be seen on the University website www.svsu.ac.in
- viii. Weightage of only those documents shall be counted whose copies are attached.
- ix. Application not supported with required application fee, Performa for their respective position/post applied, self-attested copies of certificates/testimonials will be rejected.
- x. No application/documents shall be accepted after the expiry of last date of the receipt of application forms. Incomplete form and those received after the expiry of last date will not be entertained and will stand rejected summarily.

D.D Number _____ **Amount** _____

Issuing Bank _____ **Date** _____

Name of the post applied _____

Post Code _____

Advertisement No. _____

1. Full Name _____

2. Father's Name _____

3. Mother's Name _____

4. Spouse's Name (if married) _____

5. 5. Date of Birth: Day _____ Month _____ Year _____

(As recorded in the Matriculation or equivalent certificate)

6. Age (as on the last date fixed for the receipt of application)

Years _____ Months _____ Days _____

7. Nationality _____

8. Religion _____

9. Marital Status (Married/ Unmarried) _____

10. Sex (Male/ Female) _____

11. Do you belong to any reserved category? (Yes/ No) _____ If yes, specify the category

12. Do you belong to Minority category? (Yes/ No) _____

13. Do you belong to Ex-Servicemen category? (Yes/ No) _____

14. Are you physically disabled? _____

15. If physically disabled, indicate the relevant particulars

Nature of Disability	If applicable, Write 'yes'	Percentage of disability
a. Blindness or low vision		
b. Hearing impairment		
. Locomotor disability or cerebral palsy (includes all cases of Orthopedically handicapped)		
. Autism, intellectual disability, specific learning disability and mental illness		

16. Languages Known:

Read	Write	Known

17. Permanent Address:

PIN CODE _____ Mobile No. _____

18. Correspondence Address:

PIN CODE _____ MOBILE NO. _____

EMAIL ID _____

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

	Name of the Course	Name of the Board/ University	Month & Year passed	Division	% of Marks	Mode of Education (Regular/ Part-time/ Distance/ etc.	Subjects studied
	(a)	(b)	(c)	(d)	(e)	(f)	(g)
10th Class/ equivalent							
10+2/ equivalent							
Bachelor's degree							
Master's degree							
M.Phil.							
Ph.D. degree							
Any Other							

20. Evidence of innovative library services including integration of ICT in library (separate sheet may be enclosed with supporting documents if any)

- a.
- b.
- c.
- d.
- e.
- f.

21. Details of best three Research publications (copy of full papers to be attached).

22. Academic distinctions

Name of the Academic Course/ Body	Academic distinction obtained

23. Chronological list of experience (including current position/ employment)

Sr. No.	Designation & scale of pay	Name & address of employer	Period of Experience			Nature of appointment (Regular/ Contractual)	Scale of Pay	
			From Date	To Date	No. of years/ months (As on date of advertisement)		Pay Band	Level/ Grade Pay/ AGP
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)

24. Present position

Name of the Institution	Designation	From date	Pay in pay band	Level/ Grade Pay/ AGP	Gross Pay/ Total Salary per month (Rs.)	Next date of Increment

25. Research & academic contributions (if any): -

Sr. No.	Record	Relevant details	Details of documents (mention C.P where these documents are attached with the application)
1.	NET with JRF		
	NET		
	SLET/ SET		
2.	No. Research Publications research publications published in peer-reviewed or UGC-listed Journals)		
3.	Details of experience a) As a University Librarian in the University b) As a College Librarian c) Teaching experience as Associate Professor d) Teaching experience As Assistant Professor		
4.	Please provide details of the Awards (if any)		
	International/ National Level (Awards Given by International Organizations/ Government of India/ Government of India recognized National Level Bodies)		
	State-Level (Awards given by State Government)		

26. Reference: (These persons should be professionally competent, who are well acquainted with some aspect of the applicant's training accomplishment, capabilities and character but must not be in blood relation to the Candidate). Two references should be listed:-

a)

Name:- _____

Occupation or Position:- _____

Address:- _____

Email:- _____

b)

Name:- _____

Occupation or Position:- _____

Address:- _____

Email:- _____

27. Joining Time, If Selected (in days): _____

28. List of self-attested testimonials attached (original to be produced at the time of applicable).

Please tick the ones applicable.

- I. Matriculation mark sheet and certificate.
- II. Intermediate (Senior Secondary) marksheet and certificate.
- III. Bachelor's Programme marksheets and degree.
- IV. Master's Programme marksheets and degree.
- V. M.Phil. degree.
- VI. Ph.D. / D.Phil. degree
- VII. Caste Certificate issued by the competent authority
- VIII. Experience Certificates
- IX. Disability Certificate
- X.
- XI.
- XII.

Note: Applications without the above self-attested testimonials (applicable to the candidate) will not be entertained.

29. State whether you have been at any time:-

(a) Dismissed, removed or debarred from service (Yes/ No) _____

(b) Convicted by a criminal court (Yes / No) _____

30. I hereby declare that all entries made by me in this application are correct and true to the best of my knowledge and belief. I understand that in the event of any information being found incorrect or false, my candidature/ appointment is liable to be cancelled/ terminated.

Place _____

Date _____

Signature of the Applicant

ENDORSEMENT OF THE EMPLOYER

Ref. No. _____

Date _____

FORWARDED

The applicant _____ (name) is holding the post of (post) in this College/ University/ Institution/ Department in a temporary/ substantive basis since _____ (date) in the pay level _____. His/ her present pay is Rs. _____ per month. His/ her next date of increment is _____. We have no objection to his/ her application being considered for the post of _____. It is further certified that no vigilance case is going on or contemplated against him/ her.

Signature of the Officer with seal