



## APPLICATION FORM FOR UNIVERSITY LIBRARIAN

FOR OFFICE USE ONLY
Application No:
Received on (date):
Total no. of pages received:
Name & Sign. of dealing official:

<b>PASTE HERE A SIGNED COPY OF YOUR RECENT PASS- PORT SIZE PHOTOGRAPH</b>
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### 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](http://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 Speak

i) \_\_\_\_\_ ii) \_\_\_\_\_  
 \_\_\_\_\_

17. Permanent Address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 PIN CODE \_\_\_\_\_ Phone No. \_\_\_\_\_

18. Correspondence Address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 PIN CODE \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Email ID \_\_\_\_\_

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

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

**\*Please enclose the conversion formula**

**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).**

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**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**

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

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

<b>Sr. No.</b>	<b>Record</b>	<b>Relevant details</b>	<b>Details of documents (mention C.P where these documents are attached with the application)</b>
<b>1.</b>	<b>NET with JRF</b>		
	<b>NET</b>		
	<b>SLET/ SET</b>		
<b>2.</b>	<b>No. Research Publications research publications published in peer-reviewed or UGC-listed Journals)</b>		

3.	<b>Details of experience</b> 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.	<b>Please provide details of the Awards( if any)</b>		
	<b>International/ National Level (Awards given by International Organizations/ Government of India/ Government of India recognised National Level Bodies)</b>		
	<b>State-Level (Awards given by State Government)</b>		

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: \_\_\_\_\_

With email: \_\_\_\_\_

b) Name: \_\_\_\_\_

Occupation or Position: \_\_\_\_\_

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

With email: \_\_\_\_\_

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

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

interview). 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**