



JB GROUP OF EDUCATIONAL INSTITUTIONS

APPLICATION FORM FOR LABORATORY STAFF

	Application for	the Post of		in	.(Department)
1.	Name: Dr. /Mr./Ms.				Photo
		(As per Official Re	cords)	(Surname)	
2.	Father's / Spouse's Na	ame :			
3.	Phone:		Mobile :		
4.	Email Id :				
				City/Town	
				City/Town	
7.	Date of Birth//	Age:	Years	Married : Yes / No	No. of Children
	(DD/MM/)	(YYY)			
8.	Caste : (SC/ST/BC/EBC/	OC) :	Rel	igion:	
9.	Specialisation :		De	partment :	

10. Qualifications :(Starting from Highest Degree):

Qualification	Degree Awarded	Name of College / Institute /University	Constituent or Affiliated College	Studied from Year to Year	Year of Passing	Grade/ Aggregate Marks (%)
Post- Graduation						
Graduation						
Diploma						
Any Other Qualification						
					Continued	2

- 11. Total Experience :/...Teaching :..../... Research : .../...Industry :/....

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- 12. Employment Details (Starting with the Present Employment) :

Employer's Name and Address	Period of Service (Month & Year)		Designation	Gross Salary per Month (Rs.)	Reason for Change
	From	То			

13. Notice Period with the Present Employer : Months

14. Publications (No of Papers) :

- NationalInternationalTotal(a) Journals:
- (b) Conference Proceedings :
- 15. Present Salary: Rs.p.m.(Enclose Documentary Evidence)
- 16. Expected Salary: Rs..... p.m

17. Please write statement of purpose or give any other additional information about your strengths or achievements :

Date:

Signature of the Applicant