WALK-IN-INTERVIEW- CONSULTANTS (Examination) FOR WORK ENGAGEMENT THROUGH CONTRACT

MAHARSHI SANDIPANI VEDAVIDYA PRATISHTHAN APPLICATION FORM

NOTE:

Walk-in-interview is to examine the work proficiency of the prospective candidates; As per the policy, actual engagement will be done only on short term contract basis. Canvassing in any form will be a disqualification.

1.	Work Engagement Applied for:			
2.	Full Name of the Candidate: (in Capitals)			Paste your recent passport size photograph
			• • • • • • • • • • • • • • • • • • • •	
3.	Date of Birth: Day Month	Year	Age	
4.	Gender: (Write '1' for Male, '2' for Female)	Tear		
5. 6.	Marital Status:			
7.	Mother's Name:			
8.	Husband's Name: (If applicable)			
9.	Mailing Address (in BLOCK letters):			
			Pin Code:	
	Tel. No.:	Mobi	le:	
	E.mail ID (compulsory):			
10.	Nationality:			
11.	Whether Physically Handicapped? : (Write '1'	for Yes, '2' for I	No)	
12.	Community (please tick $\sqrt{}$) SC	ST C	OBC GENERAL	
13.	Computer Literacy/ Proficiency (1) Profession	nal with Program	nming(spe	ecify)
	(2) Any other	r		
1/1	Proficiency in Languages (1)	(2)	(3)	

15.	All Educational/other Professional (Qualifications/Training	Courses etc/10 th Examination onwards:
13.	All Educational/other riolessional v	Juanincanons/ manning	Courses etc/10 Examination onwards.

Level	Exam		Year of	Duration of the	Board/	Subject of Specialisation
	passed/ Trg.	% of Marks	Passing	Degree/ Diploma	University	

16. M.Phil/Research Degree details

Level	Research Degree Exam passed if any / Trg. If any	Year of Passing	Duration of the Degree	Board/ University	Subject of Specialisation

17. POST QUALIFICATION EXPERIENCE

Office/Instt. Firm	Position held	Part time/ Contract Basis/ Ad-	given (day, n	ates to be indicate nonth &	Remuneration received	Nature of duties
		hoc/ regular/		ear)		
		Temp./pmt.	From	То		

18. Examination Related Information

Sl	Examination organised	Board/Examining	Years	Nature of Duty
No.		Body		handled
1				
2				
3				
4				

3							
4							
19. R o	eferences (address and p	none	number) of two persons	of your locality whom	you know		
1.							
		•••••					
		• • • • • •					
2.		•••••					
		• • • • • •					
20.	Any other relevant infor	matic	on:				
21.	Details of enclosures:	1)					
		2)					
		3)					
knowl	by declare that all the st ledge and belief. I under nation is found false and e	stand	I that action can be tak	en against me by MSF			
time bup.	abide by the rules/regulatiound manner by observing I have myself agreed arisation/continuation of	g the	office decorum and integwork through contract	grity required to work in and I will not ha	the Govt of India set we any claim for		
Date:				Signature of candida	te		
Place:		Place: Address:					