

**NORTH EASTERN INSTITUTE OF AYURVEDA AND HOMOEPATHY (NEIAH)**

(AN AUTONOMOUS INSTITUTE UNDER THE MINISTRY OF AYUSH)

GOVERNMENT OF INDIA

MAWDIANGDIANG, SHILLONG, MEGHALAYA-793018

**APPLICATION FORM**

Name of the post : \_\_\_\_\_

(with discipline)

Sl. No of the Post : \_\_\_\_\_

Advertisement No. : \_\_\_\_\_

Affix self  
attested  
recent  
passport size  
photograph

1. Name in full : \_\_\_\_\_

(in CAPITAL letters)

2. Father's /Husband's Name: \_\_\_\_\_

3. Address: (in CAPITAL letters)

(i) Present address (for correspondence, with phone/mobile No. & E-mail)-

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PIN Code: \_\_\_\_\_

Email Id: \_\_\_\_\_ Mobile No: \_\_\_\_\_

(ii) Permanent Home address - \_\_\_\_\_

\_\_\_\_\_

PIN Code: \_\_\_\_\_

4. a. Date of birth: dd \_\_\_\_ mm \_\_\_\_ yr \_\_\_\_ (in figure)

b. Date of Birth in words: \_\_\_\_\_

c. Age (as on date of interview) \_\_\_\_\_ Y \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_

5. Nationality : \_\_\_\_\_

6. Sex: Male  /Female

6. Whether belonging to SC/ST/OBC/PWD/PH \_\_\_\_\_

(in support, please enclose a certificate from authorized Issuing authority)

7. (a) Mother Tongue : \_\_\_\_\_

(b) Proficiency in language(s) (Mark below as applicable ( √ ))

Language	Read	Write	Speak
English			
Hindi			

(Add other languages, if any)

**8. Qualification (Academic & Professional) (Please enclose a Xerox copy of each degree/certificate & mark- sheet):**

Examination	Name of the Degree/Diploma	Name of the College & University and Board	Year of passing	Division obtained (mention distinction if any)	Percentage of marks/OGPA obtained (Aggregate in case of degree programme)	Subject(s) (Major)/ Specialization
10 <sup>th</sup> or equivalent						
(10+2) or equivalent						
Degree/ Diploma course						
Master Degree						
PhD						
Any other examination(s)						

**09. Details of Professional Publications and Research Work:**

(Please attach details on separate sheet duly signed to include Topic / Name of Publication, Name of Journal (ISSN) / Publisher & Edition etc)

**10. Employment/Experiences Record (Starting from the present position):**

Office/Institute/ Organization	Post held	Scale of Pay /Basic Pay/ GP/NPA	From	To	Actual Duration (Years & Months)	Nature of Duties

(Please attach experience certificates from competent authority duly signed / counter signed with date)

**11. Nature of present employment, i.e. Adhoc or Temporary or Permanent:**\_\_\_\_\_

**12. In case the present employment is held on Deputation/ Contract basis, please state:**\_\_\_\_\_

- The date of initial appointment\_\_\_\_\_
- The period of appointment on deputation/contract\_\_\_\_\_
- Name of the parent office/organization to which you belong\_\_\_\_\_

**13. Training/Courses attended**\_\_\_\_\_

Name of Course	Institution	Duration

**14. Registration No.** \_\_\_\_\_ **Year** \_\_\_\_\_

**Name of State/ Central Board/ Council** \_\_\_\_\_

**Teacher's Code:**\_\_\_\_\_ (If any, offered by respective councils (CCIM/CCH/MCI/) applicable only for candidate applied for higher Teaching Posts (Professor/Associate Prof./Reader)

**15. Additional details about your present employment**

**Please state whether working under (mention name)-**

- i. Central Government \_\_\_\_\_
- ii. State Government \_\_\_\_\_
- iii. Autonomous Organization under State/Centre Govt. \_\_\_\_\_
- iv. Centre/ State Government Undertaking \_\_\_\_\_
- v. Central/State University \_\_\_\_\_
- vi. Private Organization \_\_\_\_\_

**16. Additional information, if any, which you would like to support of your suitability for the post.**

(Enclose a separate sheet, if the space is insufficient in any column.)

**17. Copies of testimonial attached:-**

- i) \_\_\_\_\_
- ii) \_\_\_\_\_
- iii) \_\_\_\_\_
- iv) \_\_\_\_\_
- v) \_\_\_\_\_
- vi) \_\_\_\_\_

**DECLARATION**

I affirm that information given in this application is true and correct. I also fully understand that if at any stage it is discovered that any attempt has been made by me to willfully conceal or misrepresent any facts, my candidature may be summarily rejected or employment terminated.

**Signature of the candidate**

Place: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(Name in CAPITAL letters)

**NO OBJECTION CERTIFICATE**

(TO BE FILLED UP BY THE CARDRE CONTROLLING AUTHORITY / PRESENT EMPLOYER)

Office of : \_\_\_\_\_

Date: \_\_\_\_\_

F.No. \_\_\_\_\_

1. This department / Office have no objection in case the applicant Sh/Smt \_\_\_\_\_ is selected for the post applied for and therefore the application submitted by him is forwarded herewith.
2. It is certified that:-
  - a) The applicant, if selected will be relieved immediately.
  - b) The particulars furnished by the applicant have been checked from available records and found correct.
  - c) The applicant is eligible for the post applied for as per conditions mentioned in the circular/ advertisement.
  - d) Integrity of the applicant is certified as "Beyond Doubt"
  - e) There is no case pending or contemplated against the applicant from Discipline or Vigilance angle.
  - f) No penalty has been imposed on the applicant during the last 10 years (alternative, penalty statement during the last 10 years may be enclosed)
3. Attested photocopies of up-to-date ACRs/APARs for the last 5 years are enclosed (Photocopies of ACRs/APARs to be attested on each page by the authorized officer not below the rank of Under Secretary or equivalent.)

**Date:**

**Place:**

**Signature:** \_\_\_\_\_

**Name and Designation of the forwarding Officer  
(Office Stamp)**