

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 th 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. (a) Employment/Experiences Record (Starting from the present position):

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

10 (b)

- (i) Total experience as Assistant Professor-
- (ii) Total experience as Associate Professor-
- (iii) Total experience as Professor-
- (iv) Total experience-

(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:_____

- a. The date of initial appointment_____
- b. The period of appointment on deputation/contract_____
- c. 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 _____

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) _____
- ii) _____
- 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)**