



आर्यभट्ट ज्ञान विश्वविद्यालय

ARYABHATTA KNOWLEDGE UNIVERSITY

(Established by Government of Bihar, Under Bihar Act 24, 2008)
Chanakya National law University Campus, Mithapur, Patna-800001 Phone
No: +91612-2366997, website: www.akubihar.ac.in

Section C

Application form for Non-Teaching Posts		
<p>आर्यभट्ट ज्ञान विश्वविद्यालय ARYABHATTA KNOWLEDGE UNIVERSITY Chanakya National law University Campus, Mithapur, Patna-800001 Phone No: +91612-2366997, website: www.akubihar.ac.in</p>	<p>Registration Number (For Office use only)</p> <p>.....</p>	<p>Paste your recent passport size photograph here</p>
<p>Advertisement No.....</p>		

1.Details of application fee payment (if any)							
DD Number	Date	Amount	Name of the Bank	DD Issuing branch's name			
2.	Name of the post applied for						
Personal Details							
3.	Name (in Capital Letter)	First Name	Middle Name	Surname			
4.	Date of Birth	Day	Month	Year	Age as on date of advertisement	Years	Month
5.	Place of Birth						
6.	Father's Name						
7.	Mother's Name						

14. Chronological List of experience (Starting with the first appointment)						
Designation & scale of pay	Name & address of employers	Period of Experience			Nature of Work/Duties	S.No. of proof enclosed
		From date	To Date	No. of years/ months (As on date of advertisement)		
(a)	(b)	(c)	(d)	(e)	(f)	(g)

15. Total period of Experience _____ Years _____ months _____ days

16. Present position details					
Designation	Name of the University/Institution	Basic Pay	Gross pay/Total Salary p.m	Increment date (Date/Month)	S.no. of Proof enclosed

17. Any other information/qualification relevant to the post applied for:

18. Candidate's Name & Address for Correspondence:			
	Mailing Address	Permanent Address	
Name			
Complete Address with pin code			
Email:	Phone No. (Landline with STD code)	Mobile No.	Fax No.

19. List of self attested testimonials attached (original to be produced at the time of Interview). Please tick(☐) the ones applicable

1. Matriculation marksheet/certificate
2. +2/Intermediate marksheet/certificate
3. B.A./B.Sc./B.Com(Final) marksheet/degree
4. M.A/M.Sc./M.Com marksheet/degree
5. L.L.B marksheet/degree
6. L.L.M marksheet/degree
7. Caste Certificate issued by the Competent Authority(OBC/SC/ST/etc.)
8. Experience certificate(s)
9. Recommendation letter(s)
10. Any other degree or diploma
11. Award(s)
- 12.
- 13.
- 14.

Total Number of above self attested testimonials attached _____
(in words) _____

Note: Application without the above self attested testimonials (applicable to the candidate) will not be entertained

20. Declaration

I, _____ son/ daughter of _____

hereby declare that all the entries made by me in this application are true, to the best of my knowledge and belief. No disciplinary/ vigilance case has ever been held or contemplated or is pending against me. If anything is found false or incorrect at any stage, my candidature/appointment may be cancelled by the university without assigning any reason thereof.

Signature of the applicant

Date: _____

Name as signed(in BLOCK LETTERS)

Application not signed by the candidate
is liable to be rejected

21. Endorsement by the EMPLOYER

(The endorsement below is to be signed and forwarded by the Head of the Department/Employer of the organization/institution in the case of the in-service candidate whether in permanent/contact or temporary capacity)

Forwarded to the Aryabhata Knowledge University, Patna-1, India:

The applicant Dr./Mr./Mrs./Ms. _____, who has submitted this application for the post of _____ in the Aryabhata Knowledge University, Patna, has been working in this organization namely _____ in the post of _____ in a temporary /contract/permanent capacity with effect from _____ in the Scale of Pay of Rs. _____. He/She is drawing basic pay of Rs. _____. His/her next increment is due on _____.

Further, it is certified that no disciplinary/vigilance case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by the Aryabhata Knowledge University, Patna.

(Signature of the forwarding officer)

Name : _____

Designation : _____

Place : _____

Date : _____

Seal