APPLICATION FORM FOR THE POST OF ASSISTANT PROFESSOR

Depart Region	oint Director tment of Collegiate Education nal Office vad-580001	
Applic	eation for the post of 'Assistant Pro	fessor' for the subject of COMPUTER SCIENCE at
BAJSS	S Arts and commerce women's colle	ege, Gayatri Campus Ranebennur-581115.
NOTI	FICATION No:	
1.	Name in (BLOCK) Letters	:
2.	Date of Birth	:
3.	Father Name	:
4.	Mother Name	:
5.	Religion	:
6.	Caste	:
7.	Nationality	:
8.	Educational Qualification	:.
9.	K-SET/NET	:
10	. Languages Known	:
11	. Permanent Address	: .
12	. Contact No.& Mail ID	:

Enclosures:

1. Curriculum Vitae

2.	Marks cards				
3.	Passing Certificates and Convocat	ion			
4.	Service letter				
5.	Publications				
6.	Aadhar Card				
7.	Other relevant Documents				
	Fee Particulars: Amount (Rs.)	D.D.No& Date	Name of the Bank		
	2000/-		Bank		
Declaration: I hereby declare that all the entries in this application are true and correct to the best of my knowledge and belief.					
Place:					
Date:	/ /		Signature of the Applicant		
			(CANDIDATE NAME)		

APPLICATION FORM FOR THE POST OF ASSISTANT PROFESSOR

То	
The Secretary BAJSS Arts and commerce women's coll Gayatri campus Ranebennur-581115	ege
A 1' ' C 1	C 16 4 1 1 4 COMPUTED CONTINUE
	ofessor' for the subject of COMPUTER SCIENCE at ege, Gayatri campus Ranebennur-581115.
NOTIFICATION No:	ege, Gayaar campus rancocmiai 301113.
1. Name in (BLOCK) Letters	:
2. Date of Birth	:
3. Father Name	:
4. Mother Name	:
5. Religion	:
6. Caste	:
7. Nationality	: INDIAN
8. Educational Qualification	:
9. K-SET/NET	:
10. Languages Known	:
11. Permanent Address	:
12. Contact No.& Mail ID	•

Enclosures:

1.	Curriculum Vitae					
2.	Marks cards					
3.	Passing Certificates and Convoca	ition				
4.	Service letter					
5.	Publications					
6.	Aadhar Card					
7.	Other relevant Documents					
Fee Pa	rticulars: Amount (Rs.)	D.D.No& Date	Name of the Bank			
	2000/-		Bank			
Declaration: I hereby declare that all the entries in this application are true and correct to the best of my knowledge and belief.						
Place:						
Date:	/ /2025		Signature of the Applicant			
			(CANDIDATE NAME)			