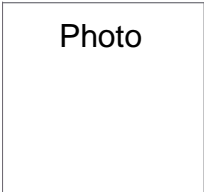




JB GROUP OF EDUCATIONAL INSTITUTIONS
APPLICATION FORM FOR OFFICE EXECUTIVE ASSISTANT &
ACCOUNTS ASSISTANT

Application for the Post of..... in(Department)



1. Name: Dr. /Mr./Ms. ----- : -----
 (As per Official Records) (Surname)

2. Father's / Spouse's Name : -----

3. Phone: Mobile :

4. Email Id :

5. Present Address:
 City/Town

6. Permanent Address :
 City/Town.....

7. Date of Birth .../.../... Age : Years Married : Yes / No No. of Children.....
 (DD/MM/YYYY)

8. Caste : (SC/ST/BC/EBC/OC) : Religion:.....

9. Specialisation : Department :

10.

Qualifications	Degree Awarded	Name of College / Institute /University	Constituent or Affiliated College	Studied from ...Year to .. Year	Year of Passing	Grade/ Aggregate Marks (%)
Post-Graduation						
Graduation						
Diploma						
Any Other Qualification						

11. Total Experience :/...Teaching :.../... Research : .../....Industry :/.....
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12. Employment Details (Starting with the Present Employment) :

Employer's Name and Address	Period of Service (Month & Year)		Designation	Gross Salary per Month (Rs.)	Reason for Change
	From	To			

13. Notice Period with the Present Employer : Months

14. Publications (No of Papers) :

	<u>National</u>	<u>International</u>	<u>Total</u>
(a) Journals :			
(b) Conference Proceedings :			

15. Present Salary: Rs.p.m.(Enclose Documentary Evidence)

16. Expected Salary: Rs..... p.m

17. Please write statement of purpose or give any other additional information about your strengths or achievements :

Date: _____ **Signature of the Applicant**

Note: Attach your latest CV with Photograph, copies of Academic Qualifications & Experience with this form