## **GOVERNMENT OF KARNATAKA**

# **APPLICATION FORM**

Affix your recent passport size photograph

## DEPARTMENT OF HORTICULTURE & L UNIVERSITY OF HORTICULTURAL SCIENCES, BAGALKOT CENTRE OF EXCELLENCE FOR FARMER PRODUCER ORGANIZATIONS

## APPLICATION FOR APPOINTMENT OF SENIOR CONSULTANTS/CONSULTANTS

#### Advertisement No.

Bank DD No. :	Date :	Amount :
Name of the Bank: STATE BA	NK OF INDIA	Branch :

## **Instructions to the candidates**

- 1. Please answer each item clearly and completely.
- 2. Incomplete applications are liable to be rejected.
- 3. The application proforma downloaded from website (*www.uhsbagalkot.edu.in*) should accompany the processing fee of Rs.2,500/- in the form of Demand Draft in favour of COE-FPO as indicated in the notification, at the time of submission of filled in application, or else, the application will be rejected.

# **APPLICATION FORM**

1. Name of the position applied for									
<ul><li>2. Name of the applicant in full (BLOCK LETTERS)</li><li>(as entered in SSLC or equivalent marks card)</li></ul>									
3. Address for communication with pincode									
4. E-mail ID									
5. Contact numbers: (With STD codes)	Ph No	):							
	Mobi	le No:							
6. a) Gender									
b) Date of Birth (bonafide certificate to be enclosed)	D	D	М	M	Y	Y	Y	Y	-
								icatior Day	
7. Native Place:			a15	······		1113		Day	
	Talu	ka							
	Dist	rict							
	State	2							
8. Religion									
9. Caste									
10. Sub-Caste									
10. Sub-Caste   11. Nationality									

13. Father's Name	
Address	
Occupation	
Nationality	

#### 14. Languages Proficiency

Reading	Writing	Speaking

15. Whether educational and other qualifications required for the post as per the notification are satisfied (if any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same. Insert additional rows if required)

Sl. No	State qualifications / Experience required as per notification	State Qualifications / Experience possessed by the applicant
1		
2		
3		

16. Details of the educational qualifications

SI.	Name of Exam	Marks Details (CGPA / OGPA)			X		Name of Board of	
No.	passed	Obtained	Max.	% age	specialization	Duration	Examination / University	
1	Bachelor's degree							
2	Master's degree							
3	Ph.D							
6	Other degree if any							

Note: The specialization at the Master's degree and Ph. D should be clearly indicated.

17. Details of employment/experience in chronological order. Enclose a separate sheet, duly authenticated with your signature, if the space below is insufficient:

SI. No	Name of Employer	Post held	Date of joining	Date of leaving	Period of service (year/months/ days)	Reason for leaving	Total emoluments drawn (Certified copy drawn emoluments to be enclosed)	Nature of duties performed

### 18. Externally funded projects operated:

Sl. No	Project Particulars	Capacity in which handled	Project Outlay

19. Please state whether working under:

a) Central Government/ State Government/ Universities

b) Public Sector Undertakings or Semi-Government

c) Private Sector Organizations

d) Recognized Research Institutions

e) Autonomous or Statutory Organizations / International Institutions

20. List of publications/books/research papers/policy papers. Enclose a separate sheet, duly authenticated with your signature along with copies for proof (First page/cover page of the publication. Insert additional rows if required)

Sl. No.	Particulars	Titles of the Papers/Books Published/Symposia/Seminar/ Conference etc.	Name of the Journal and year / Publisher.

21. Special Awards / Medals / Fellowships / recognition / for Professional excellence

Sl. No.	Particulars	No. of awards	Year	Awarded for

### 22. Any other attainment in the professional field:

Sl. No.	Particulars	Details

### 23. Have you been outside India? If so, give particulars

Sl. No.	Country	Period of visit	Purpose of visit

24. Details of experience in organizing programmes related to agriculture development

Particulars						
International level						
National level						
University level						

#### 25. Computer Proficiency

26. Name and Address of the two references

1)

2)

27. List of enclosures

I hereby declare and certify that the entries furnished above, are true to the best of my knowledge and belief.

Place:

Date:

### SIGNATURE OF THE APPLICANT

#### **CERTIFICATE**

Certified that the information furnished above is true and correct to the best of my knowledge and belief. If any information is found to be willfully suppressed or found not correct, I will forego my employment and abide by any disciplinary action by the Competent Authority.

Date: Address:

#### SIGNATURE OF THE APPLICANT

# FORWARDAL CERTIFICATE BY THE EMPLOYER

Certified that Mr. / Mrs.				is working							
in this_								_ Departme	nt / In	stitute / C	Organization
as				for th	e peri	od from		t	o		in the scale
of	He / She is at present drawing a basic pay of The DA and									The DA and	
other a	llowa	ances a	imou	nt to			·				
	We	have	No	Objection			-	-	-		he post of Producers
Organi	zatio	n, Dep	artm	ent of Hort	icultu	re, Gover	rnme	nt of Karnata	ıka		

Place:

Date:

## SIGNATURE AND DESIGNATION WITH SEAL