NAGALAND

ICFAI University Nagaland

(Established under the ICFAI University Nagaland Act, 2006) Sovima, 6th Mile, Dimapur – 797 112, Nagaland Phone: 03862-234816, Fax: 03862-234815

Website: www.iunagaland.edu.in

Application form for non-teaching positions

Application in response to the advertisement of (date): 20					
Post applied for:					
* Bank Details of Applic	ation Fee:		Affix Recent Passport Size		
i) Bank Draft No.:	Date:	Payable at:	Photograph		
ii) In case of amount ren	nitted directly, No. :	Date :			
Personal Information:					
Title (Mr/Ms/Dr/Er)	Surname	First name	Middle name		
Marital Status:		Gender:			
Current Address:		Permanent Address:			
Email address :					
Nationality:		Date of Birth:			
Father's Name:					

*Application fee: Rs. 400 for General candidates / Rs. 300 for SC/ST/OBC (Valid Certificate proving the SC/ST/OBC status must be attached along with the application form). The Demand Draft should be in favour of "ICFAI University Nagaland", payable at Dimapur.

Examination /	n (class X or equivalen Name of school/	Marks or		
Degree	board/ college/	grades (CGPA /	Year of passing	Subject(s) taken
	university	percentage)		
	Any other Degr	ee/ Diploma/ Tech	nnical Qualification	ı

English Language Skills (please tick appropriate qualifier)				
Reading	Excellent	Very good	Good	Fair
Writing	Excellent	Very good	Good	Fair
Speaking	Excellent	Very good	Good	Fair

Current Academic Pursuit:						
Are you attending any part-time / whole time course of study? If so, state the name of the						
course and the Institution you have joined:						
Employment I		iche stantine with we	o	nt ich		
Please give deta	iis of your previous	jobs, starting with yo	ur current/most rece	nt Job		
From	To	Name &		Salary Drawn	Nature of	
(Month &	(Month &	address of	Position held	Present Basic	work	
Year)	Year)	employer		Pay and	(Please attach	
ŕ	ŕ			Allowances (Give Details)	of	
				(Give Details)	requirements)	
Gaps in emp	loyment history	7 •				
Please provi	ide a brief expla	nation for any tir	ne when you we	re neither worki	ng nor in full-	
time educati	on:					
Employment matters:						
Has your current or any previous employer instituted disciplinary proceedings						
against you which have resulted in a warning, suspension, discharge or other						
disciplinary action?						
If YES, please give details, including any pending proceedings, on a separate sheet.						

Education matters:

Have you ever been debarred or punished for adopting unfair means in any examination conducted by any institution or agency?

If YES, please give details, including any pending proceedings, on a separate sheet.

Other Information:

How many days' notice must you give to your current employer?

What is the minimum basic pay acceptable to you?

Have you applied for any other post of the University? If so, state the name of the post and date when applied:

Are you willing to be considered for a position at a lower level?

If you are disabled or handicapped, please provide details. Please indicate any special enabling arrangement you may need to attend an interview, if shortlisted.

If you have any serious health problems or have a history of health problems, please give details.

Have you been convicted by the Courts, cautioned, reprimanded or warned for any criminal offence (either in India or abroad)? If yes, please give details.

Supporting Statement:

In support of your application, please attach a statement giving your reasons for applying for this post, explaining how you feel you meet the requirements of the job and indicating briefly how you could contribute in the institution building including any information which you consider relevant to this application, particularly if you have multi-tasking skills, high degree of professional commitments and can work in a highly competitive and challenging work culture

Please provide the names and contact details of	two persons who can provide references relating		
to your suitability for this post. One of the referees must be your current / most recent employer.			
References from friends or relatives will not be a	· · · · · · · · · · · · · · · · · · ·		
	-		
First Referee:			
Name:	Postal address with PIN No. :		
Position / Occupation:			
Email:			
Eman:	Work phone number (with STD Code):		
	work phone number (with 31D code).		
Mobile No.:			
	Fax (if any):		
Second Referee:			
	D (I II) (I DYN N		
Name:	Postal address with PIN No. :		
Position / Occupation:			
1 osition / Occupation .			
Email:			
	Work phone number (with STD Code):		
36.10.37			
Mobile No.:	For (if any)		
	Fax (if any):		

References:

ADDITIONAL INFORMATION

Family Background:		
Father's/ Spouse Name:		
His/ Her Qualification: _		
Occupation/ Designation	:	
Address:		
Mobile No.:		
Email ID:		
Computer Proficiency:		
	Please Specify	Proficiency Level
Operating System		
MS Office		
Application Packages		
Internet Browsing		
Reason for change (if alr	eady employed):	
Strengths (not exceeding propose to build on these .	4 lines) Please identify you strengths:	ur major strength, and how do you
Weaknesses (not exceedi you propose to overcome t		our major weaknesses, and how do

Career Goals and Aspirations: (Please identify your Short terms (5 years) and Long terms (10 years) Goals)
Short-term goals:
Long-term goals:
ALL APPLICANTS MUST SIGN THE DECLARATION BELOW
Declaration : The information provided in this application form and any supporting documentation is true and complete. I understand that any offer of employment will be conditional upon satisfactory screening of my application. I agree that any deliberate omission, falsification or misrepresentation in the application form or supporting documentation will be grounds enough for rejecting this application or subsequent dismissal, if employed, by the ICFAI University Nagaland. I have enclosed self-attested copies of documents (relevant certificates, degrees, testimonials etc.) in support of my application.
I agree to the above declaration (please tick)
Place: (Signature of Applicant)
Date:
Candidate already employed should submit application through his/her employer
The endorsement below is to be signed and forwarded by the Head of the Department/Employer in the case of the in-service candidates whether in permanent or temporary capacity in Government/Semi Government/ Public Sector undertakings/ State/Central Universities/ Autonomous body, failing which the application is liable to be rejected.

ENDORSEMENT OF THE EMPLOYER

Ref. N	No	Date
		is hereby forwarded ion to his/her application being considered. applicant in this application form has been reference to his/her service records.
		Signature of the forwarding Officer (With Office Seal)