

Age			Years			Months			Days
Nationality									
Male/Female/Other									

3. Tick the correct category

Caste Category	S.C.	S.T.	V.J.(A)	N.T.			S.B.C.	O.B.C.	E.W.S.	OPEN
				B	C	D				

4. Details of fees. (To be paid online only through the following links)

- 1) <https://ycmou.unisuite.in/t/141> (for Unreserved Category) and
- 2) <https://ycmou.unisuite.in/t/142> (for Reserved Category).
- 3) Application fees paid through any other mode shall not be accepted.

Attach the hard copy of online receipt along with the application form.

Receipt No.:- _____ Date:- ___/___/2023 Amount Rs. _____/-

5. Educational Qualifications:

Examination	University/Board	Month and Year of Passing	Subject	% of Marks	Class/ Division	Attach. Document No.
S. S. C.						5.1
H.S.C.						5.2
Graduate						5.3
Post-Graduate						5.4
Doctor's Degree (Ph.D)						5.5
						5.6
						5.7
						5.8
						5.9
						5.10

6. Teaching Experience of Private / Unaided Service (Attach attested copies of University approval/experience certificate from Competent Authority)

Sr. No.	Institution/ Organisation	Position Held	Pay Scale	Basic Pay	Gross Salary	Period		Total Years/ Months	Period of University Approval			Attached Document No.
						From	To		From	To	Total Years/ Months	
												6.1
												6.2
												6.3
												6.4
												6.5
												6.6

7. Teaching Experience of Government / Aided Service (Attach relevant document for experience)

Sr. No.	Institution/ Organisation	Position Held	Pay Scale	Basic Pay	Gross Salary	Period		Total Years/ Months	Attached Document No.
						From	To		
									7.1
									7.2
									7.3
									7.4
									7.5
									7.6
									7.7

8. Experience on Academic Administration / Administration (Attach relevant document for experience)

Sr. No.	Institution/ Organisation	Position Held	Pay Scale	Basic Pay	Gross Salary	Period		Total Years/ Months	Attached Document No.
						From	To		
									8.1
									8.2
									8.3
									8.4
									8.5
									8.6
									8.7
									8.8
									8.9
									8.10

09. Positions with Pay Scale detail.

(a) Present position: _____

(b) Name of the Institution / Organisation where employed:

(c) Salary:

Pay Rs. _____ in the pay-scale (pay band/Pay Matrix) of Rs. _____

D.A. Rs. _____

H.R.A. Rs. _____

C.L.A. Rs. _____

Other Rs. _____

Allowance, if any _____

Total Rs. _____ (Attach Last Pay Certificate)

(d) Date of appointment: _____

10. Other Achievements/ Awards/ Appreciation Letters etc.

11. List the Membership of various National / International Academic / Non—Academic bodies / University Authorities.

12. Publications (related to the work of the post applied for preferred)

13. Patents, if any

14 Documents (Self Attested photo copies) attached

1	Date of Birth	2	Caste Certificate if reserve Category
3	Graduation	4	Post Graduation
5	Doctorate	6	
7		8	
9		10	
11		12	
13		14	
15		16	

15. Names and Addresses of not more than two persons to whom references may be made

1) _____

2) _____

I hereby declare that all statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature / appointment is liable to be cancelled / terminated. I further understand that no notice shall be taken of any request for withdrawal of my application. I have read all the General Instructions and Terms & Conditions of this Advt.No.YCMOU/Est./2023/01-2023/961 dated 11.08.2023 and I abide to all the General Instructions and Terms & Conditions.

Place:

Date: / /2023

(Signature of the Candidate with Name)

If employed, the application should be forwarded through proper channel

Application of Shri/ Smt _____ for the post of _____ is forwarded through proper channel.

Place:

Seal

Signature, Name and Designation

Date: / /2023

CERTIFICATE

I, Shri/Smt/Kum _____ have applied for the post of _____

I state that I am neither convicted nor any criminal case, departmental enquiry or disciplinary action is pending against me.

In case any false information is detected, I understand that my application is liable to be rejected or the appointment made would stand terminated.

Place:

Date: / /2023

(Signature of the Candidate)

(Government of Maharashtra Gazette, March 28th, 2005, Form – A (See Rule -4)

Declaration

I, Shri/Smt/Kum _____ Son/daughter/wife
of Shri. _____ Age _____ years, resident of _____

hereby declare as follows:

That I have filled my application for the post of _____

I have _____ (Number) living children as on today. Out of which _____ No. of children born after
28th March, 2005 is _____ (*Mention dates of birth, if any*)

I am aware that, if any total number of living children is more than two due to children born after
28th March, 2005, I am liable to be disqualified for the same post.

Place:

Date: / /2023

(Signature of the Candidate)

No Objection Certificate

(To be signed and forwarded by the present employer on Letter Head)

Forwarded To,

The Registrar,
Yashwantrao Chavan Maharashtra Open University,
Dnyangangotri, Near Gangapur Dam, Govardhan,
Nashik– 422 222

The applicant Dr/Shri./Smt. _____ who has submitted this application for the post of _____ in the Yashwantrao Chavan Maharashtra Open University, Nashik, has been working in _____ on the post of _____ in a temporary / permanent capacity with effect from _____ in the scale of pay / Pay Band with Grade Pay / Matrix Pay _____ His or her next increment is due on _____

This Organization/ Institute have no objection on his application for the above post.

Place:

Date: / /2023

**Signature of the forwarding authority
(Name and Designation)**

Office Seal