

UNIVERSITY OF MYSORE
Multimedia Learning Resource Creation Centre
(UPE Scheme of UGC)
EMRC Building, Manasagangotri, Mysore – 570 006

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APPLICATION FORM

Advertisement Ref.No.....

Please fill in Block Letters / incomplete applications are liable to be rejected.

NAME OF THE PROJECT ASSIGNMENT

- 1) NAME OF THE APPLICANT
- 2) DATE OF BIRTH (DD/MM/YY)
- 3) FATHERS NAME
- 4) ADDRESS FOR CORRESPONDENCE

- 5) MOBILE NUMBER
- LANDLINE PHONE NO. WITH STD CODE.....

- 6) E-MAIL
- 7) DOMICILE STATE
- 8) CASTE
- CATEGORY [Supported by Certificate]

- 9) MARITAL STATUS

10) ACADEMIC / PROFESSIONAL QUALIFICATION

Examination Passed	Name of the Board/University/Institute	Subject Taken	Year of Passing	Duration of the course	Division/Grade	% of Marks obtained

(Enclose photocopies of certificates to support the claims)

11) PROFESSIONAL EXPERIENCE

Name of the Organization	Position held	Period		Reason for Leaving
		From	To	

(Enclose copies of certificates to support the claims)

12) Enlist your capabilities which suit the applied project position.

13) Give a list of Projects you have carried out in relation to this type of assignment.

UNDERTAKING:

I hereby certify that the information provided above is true to the best of my knowledge and in case it is found to be false or incorrect or suppressed. It shall be liable to be terminated from the service forth with without prejudice to any legal / disciplinary action as deem fit by the University / Management. I also understand that the assignment for which I am applying now is related to the MLRCC Project funded by UGC.

SIGNATURE OF THE APPLICANT

Place:

Date:

ENCLOSURES

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.