



**GAUR BRAHMAN COLLEGE OF EDUCATION**  
**ROHTAK**  
(Govt.-Aided and affiliated to M.D. University, Rohtak)

**Application Form (College Copy)**

Sr. No. \_\_\_\_\_

For office use only

Diary No. \_\_\_\_\_

Date:\_\_\_\_\_

Paste here a signed copy of your recent passport size photograph

Post Applied for\_\_\_\_\_

Name of the Newspaper\_\_\_\_\_ Dated\_\_\_\_\_

Details of fee: Demand Draft Nos. (In favour of Principal) \_\_\_\_\_  
Date\_\_\_\_\_Amount (Rs.) \_\_\_\_\_

1. Name of Applicant: (In Block Letters) \_\_\_\_\_

2. Father’s Name: (In Block Letters)\_\_\_\_\_

3. Mother’s Name ((In Block Letters)\_\_\_\_\_

4. Date of Birth: Day\_\_\_\_\_Month\_\_\_\_\_Year\_\_\_\_\_  
(As recorded in the Matriculation Certificate)

5. Age\_\_\_\_\_Years\_\_\_\_\_Months (as on the last date fixed for the receipt of application)

6. Sex (Male/Female)\_\_\_\_\_

7. Marital Status\_\_\_\_\_

8. Nationality\_\_\_\_\_

9. Religion\_\_\_\_\_ Category\_\_\_\_\_

10. AADHAR No. of Candidate:\_\_\_\_\_

11. Address for Correspondence (In Capital Letters): \_\_\_\_\_  
\_\_\_\_\_

Pin Code\_\_\_\_\_Mobile No.\_\_\_\_\_E-mail:-\_\_\_\_\_

12. Permanent Address (in Capital Letters):\_\_\_\_\_

\_\_\_\_\_

Pin Code\_\_\_\_\_Mobile No.\_\_\_\_\_E-mail:-\_\_\_\_\_

**13) Qualification:**

| Examination                           | Year | Name of Board/ University | Marks obtained | %age of Marks | Division |
|---------------------------------------|------|---------------------------|----------------|---------------|----------|
| Matriculation                         |      |                           |                |               |          |
| Sr. Sec./+2/ Pre-Uni.                 |      |                           |                |               |          |
| B.A. /B.Sc./B.Com./<br>B.B. A./B.C.A. |      |                           |                |               |          |
| M.A./M.Sc./M.Com./<br>M.C.A/M.B.A.    |      |                           |                |               |          |
| Diploma/ Certificate                  |      |                           |                |               |          |
| Any Other                             |      |                           |                |               |          |

**14) Chronological List of Work Experience (Including Current Position/Employment):-**  
**If currently employed, submit the NOC issued by the Employer.**

| Name of Institution | Post & Nature of Appointment | From | To | Total Experience |
|---------------------|------------------------------|------|----|------------------|
|                     |                              |      |    |                  |
|                     |                              |      |    |                  |
|                     |                              |      |    |                  |
|                     |                              |      |    |                  |

Yours faithfully,

Date:\_\_\_\_\_

Place:\_\_\_\_\_ (Signature of the Candidate)

Copy By Registered Post to The Dean, College Development Council, M.D. University, Rohtak-124001.

(Signature of the Candidate)

**Note:-** The Candidate may use extra sheet of paper, if required, for furnishing any other relevant details.

*For Office Use*

|    | Discrepancy (ies) if any: | Eligible/Ineligible |
|----|---------------------------|---------------------|
| 1. |                           |                     |
| 2. |                           |                     |
| 3. |                           |                     |

Signature of the Screening Committee

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

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photograph

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(As recorded in the Matriculation Certificate)
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\_\_\_\_\_

Pin Code \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail:- \_\_\_\_\_

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\_\_\_\_\_

Pin Code \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail:- \_\_\_\_\_

13 Qualification: -

| Examination                         | Year | Name of Board/<br>University | Marks<br>obtained | %age of<br>Marks | Division |
|-------------------------------------|------|------------------------------|-------------------|------------------|----------|
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| Sr. Sec./+2/ Pre-Uni.               |      |                              |                   |                  |          |
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**Signature of the Screening Committee**

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