



17. Educational/Professional/Technical Qualification (starting from Class 10<sup>th</sup> onwards)

Examination Passed	Discipline/ Specialization /Subjects	Board/ University	Year of Passing	Duration of course (in months)	Percentage of marks	Division

18. Experience if any, starting from previous to present:

**Total Experience:** \_\_\_\_\_ **Years** \_\_\_\_\_ **Months**

Employer's Name & Address [also Indicate whether Central Govt./ State Govt./PSU/Autonomous Bodies/Private Sector]	Designation	Scale of pay/ Salary per annum	Length of Service		Total Experience in Years	Nature of work, in brief
			From	To		

19.	Have you been debarred or punished for adopting unfair means in any Examination by the Institution/ Board or University? If yes, please specify	
20.	Have you been imprisoned by any Court of Law for any criminal or civil act? If so, please give details	
21.	Any other information	

22. Permanent Address:

Name	:	
Father/Husband's Name	:	
Address	:	
	:	
	:	
State	:	Pin Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Please affix one recent Photograph <u><b>duly self attested</b></u>
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**DECLARATION TO BE SIGNED BY THE CANDIDATE**

**I hereby certify and declare that** (i) I am an Indian National, (ii) I have read the provisions given in the Advertisement, (iii) All statements made and information given by me in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect at any stage, action can be taken against me by the IGNOU and my candidature/appointment shall automatically stand cancelled/terminated, (iv) I further declare that I fulfil all the conditions of eligibility regarding age, educational, professional qualifications, etc. prescribed for the post applied for as on **07.09.2009**. (v) In case my application is not received by IGNOU within the stipulated date due to postal delay or otherwise, IGNOU will not be responsible for such delay.

Place:

Date:

(Signature of the Applicant)