

**अखिल भारतीय आयुर्वेद संस्थान**  
**ALL INDIA INSTITUTE OF AYURVEDA (AIIA)**

**APPLICATION FORM - II**

**(For Paramedical & Other Posts for Direct Recruitment)**

Name of the post (with discipline) :		Affix self-attested recent passport size photograph
Advertisement No. :		
Category applied for ( <i>tick one</i> ) :	Unreserved / EWS / SC / ST / OBC / PWD / PH	
Application Fee Amount (₹) :		
SBI Collect Transaction No. :		
Payment Date :		

1. Name in full (in CAPITAL letters) : \_\_\_\_\_
2. Father's /Husband's Name : \_\_\_\_\_
3. Address: (in CAPITAL letters) : \_\_\_\_\_

(i) Present address (for correspondence, with phone/mobile No. & E-mail)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email Id \_\_\_\_\_ Mobile No. \_\_\_\_\_

(ii) Permanent home address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Date of birth : dd \_\_\_\_\_ mm \_\_\_\_\_ yyyy \_\_\_\_\_

(in words) \_\_\_\_\_

Age (as on closing date of application according to Matriculation Certificate) \_\_\_\_\_ years

5. Nationality : \_\_\_\_\_

6. Gender: :  Male  Female  Other

7. (a) Mother Tongue : \_\_\_\_\_

(b) Other language(s) which the applicant can speak, read and write fluently:

8. Whether belonging to :  SC  ST  OBC  EWS  PWD  PH

*(Please enclose a certificate from authorized Issuing Officer, in support)*

9. Examinations passed (Please enclose a copy of each degree/certificate & marksheet):

<i>Examination</i>	<i>Name of degree/ diploma and board</i>	<i>Name of college and University</i>	<i>Percentage of marks/ OG PA obtained (Aggregate in case of degree programs)</i>	<i>Division obtained</i>	<i>Year of passing</i>	<i>Subject(s) (Major)/ Specialization</i>	<i>Distinction, if any</i>
<b>(i)</b> 10+2 or equivalent							
<b>(ii)</b> Bachelor's degree							
<b>(iii)</b> Master's Degree							
<b>(iv)</b> Doctorate degree							
<b>(v)</b> Any other examination(s)							

10. Employment Record (*Starting from the present position*):

Office/ Institute/ Organisation	Post held	From	To	Scale of Pay & Basic Pay	Nature of Duties	Actual Duration (Years & Months)

20. Additional information, if any, which you would like to mention in support of your suitability for the post:

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*(Enclose separate sheet, if the space is insufficient in any column)*

**DECLARATION**

I affirm that information given in this application is true and correct. I also fully understand that if at any stage it is discovered that any attempt has been made by me to wilfully conceal or misrepresent the facts, my candidature may be summarily rejected or employment terminated.

Place: \_\_\_\_\_

Signature of the candidate

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

\_\_\_\_\_

(Name in CAPITAL letters)

**REMARKS OF THE PRESENT EMPLOYER**

*(In the case of those who are in service)*

Certified that information furnished by Shri/Ku./Smt. \_\_\_\_\_ in his/her application has been verified from the office records and is found to be correct. No vigilance/disciplinary case is pending or contemplated against him/her and he/she is clear from vigilance angle.

The applicant Shri/Ku./Smt. \_\_\_\_\_ is holding a permanent/temporary post of \_\_\_\_\_ in the scale of pay \_\_\_\_\_ from \_\_\_\_\_ and his/her present basic pay is Rs. \_\_\_\_\_ per month. His/her application is forwarded and he/she will be relieved in case he/she is selected for the post applied for.

Place: \_\_\_\_\_

Signature

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

\_\_\_\_\_

(Designation of Appointing Authority with official seal)