**ANDHRA UNIVERSITY**

Visakhapatnam-530003, INDIA

**FORMAT OF APPLICATION**

1. Post applied for:
2. Name in full (in BLOCK LETTERS):
3. Father’s/Guardian’s/Husband’s Name:
4. Date of Birth:
5. Educational Qualifications (In chronological order from latest):

6. Work Experience in IPR (Details in chronological order from latest):

7. Total experience in years after Essential Qualification:

8. Details of work / experience, if any:

9. (i) Address for Correspondence:

 (ii) Contact Number:

 (iii) Email ID:

10. (i) Permanent Address:

 (ii) Contact Number:

 (iii) Email ID:

11. Give below the names of two references (they must not be related to you) along with their designation who are in a position to testify from their personal knowledge as to your fitness for the proposed appointment.

12. Any other information you may wish to add:

 [List of publications, Membership of learned societies, awards, any form of IPRs etc]

13. Details of Enclosures:

14. DECLARATION: ­

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time I am found to have concealed / distorted any material information, my appointment shall be liable to be summarily terminated without notice / compensation.

**Place:**

**Date:**  **Signature of the candidate**