



CHANDRA SHEKHAR AZAD UNIVERSITY OF AGRICULTURE AND TECHNOLOGY, KANPUR

Application Form (To be filled by the candidate)

Affix
Recent Passport size
photograph
(Self-attested)

1. Name of the Applicant (In Block letters)				
2.	a) Advertisement No.			
	b) Post Code			
	c) Post Applied for			
3. Category applied for:- (SC/ST/OBC/EWS/UR)				
4. Details of payment of Application Fee for Candidates				
D.D. No.		Amount (in Rs.)	Date	Name of the Bank & Branch

***Demand Draft in favour of Comptroller, C. S. A. University of Agriculture and Technology, Kanpur payable at State Bank of India, Branch Code No. 3809**

(Signature of the candidate)

For Official Use Only

Date of receipt of the application

Checked by	Dealing Assistant	Office Superintendent

Remarks, if any

5. Personal Details of the Applicant

A. Name (in Capital letters)	First Name			Middle Name	Surname		
B. Date of Birth	Day	Month	Year	Age as on Closing date	Years	Month(s)	Day(s)
C. Father's name							
D. Mother's name							
E. Nationality							
F. Gender							
G. Religion							
H. Marital Status							
I. Permanent address with Pin Code							
J. Full postal address along with pin code for communication							
K. e-mail							
L. Mobile Number							
M. Telephone no. with STD code (if any)							

6. Academic Qualifications

S. No.	Examination passed	Name of the Board/University	Subjects with major field	% Marks /OGPA	Page No. of proof enclosed
1.	High School/ Matriculation				
2.	10+2/Intermediate				
3.	Graduation				
4.	Post- Graduation				
5.	Ph.D.				
6.	Any Other				

**Attach self-attested copies of Certificates, Testimonials and Degrees, etc.*

7. (i) Employment Record and Experience

Designation*	Pay Scale	Nature of Work	Organization/ Institution & place of posting	Period of Employment		Duration (Years/Months)	Page No. of proof enclosed
				From	To		

**Please mention whether Regular/Temporary Contract/Other(s) and attach appointment letters and experience certificates as per given format (for In-service candidate)*

(ii) Service in Remote Areas/ Disadvantageous area

S. No.	Designation	Institute/ Organization	Place	Date		Page No. of proof enclosed
				From	To	
1.						
2.						
3.						

8. Present Position

Designation	Name and address of Employer/ Institution	Type of the Institution*	Present Salary			Page No. of proof enclosed
			Pay Band	Basic Pay	AGP	

* Please mention whether Organization/Institution/University is a State Govt./Central Govt./ Private etc.

9. Experience in relevant field (*Experience in the field of preferential qualification including SRF/JRF etc.*)

Name of relevant Field/Organization	Duration		Year	Page No. of proof enclosed
	From	To		

10. Training Programmes attended:

Name of the Programme	Year	Duration (days)	Organising Institution

11. Management Development Programmes attended:

Name of the Programme	Year	Duration (days)	Organising Institution

12. Orientation Programmes / Training Programmes / Workshops attended:

Name of the Programme	Year	Duration (days)	Organising Institution

13. Refresher Programmes attended:

Name of the Programme	Year	Duration (in days)	Organising Institution

14. Patent(s)/Awards/Recognition/Fellowship

a) Patent(s)

Registration Agency	Patent Number/File No. and Year	Title	Page No. of proof enclosed

b) Awards/Recognition/Fellowship

Name of the Award/ Recognition/Fellowship	Awarding Organization (place/country)	Year	International/National/ Institutional Award/ Fellowship/ Recognition/ President/ Member	Page No. of proof enclosed

15. Teaching/Research/Extension/Monitoring and Research Co-ordination

a) Teaching: UG/PG Teaching

S. No.	Degree Programme/ Class Taught	Course No.	Course Title	No. of times taught/ year	Credit Hours	College/ University	Page No. of proof enclosed
1.							
2.							
3.							

Guiding Students*

S. No.	Name of Programme	No. of Student			Page No. of proof enclosed
		As Guide	As Co-guide	As Member of Advisory Committee	
1.	Master's Degree				
2.	Doctorate				

* Attach detailed list of students (M.Sc. and Ph.D.) guided as major advisor.

b) Research Projects:

S. No.	Name of Project	Funding Agency	Duration of Project	Mention (PI or Co-PI)	Amount of Grant (Rs)	Page No. of proof enclosed
	A. Externally Funded					
1.						

2.						
	B. Inter-Institutional					
1.						
2.						

c) Extension Activities:-

S. No.	Particulars	Title	Farmers benefitted	Page No. of proof enclosed
1.	Popularization of new technologies			
2.	Innovation in extension technology and methods			
3.	Initiation of abortive extension programs			
4.	Trainings conducted and farmers benefitted through awareness generation			
5.	Organizing Kisan Mela and Exhibition, TV-Radio talks, etc			

d) Monitoring and Research/Extension Coordination

S. No.	Particulars	Title	Page No. of proof enclosed
1.	Assistance in project management and coordination		
2.	Preparation of review reports/proceedings and other assigned duties (specify)		
3.	Participation in institutional activities		
4.	Innovation in monitoring and coordinate methods		
5.	Any other relevant contribution not covered above		

16. Publications*

S. No.	Particulars	Give total no. only
1.	Research papers in international referred journals (NAAS rating-2026, 6.0 and above)	
2.	Research papers in national referred journals/ University Journals (NAAS rating-2026, less than 6.0)	
3.	Review articles in referred journals	
4.	Books (Published by Publishers)	
5.	Manuals (Published by Publishers/Institute)	
6.	Chapters in Books	
7.	Popular articles (in magazines, research paper in non-referred journals and published in Proceedings)	

**Attach a complete list of publications (along with NAAS Journal ID and rating)*

Details of Publications

A. Research Publications

S. No.	Research Publications in referred journals (Name(s) of Authors in same sequence as published, Year and title of publication, Full name of the Journal, Volume & page numbers)	NAAS* Journal ID	NAAS Journal Rating* 2026	Page No. of proof enclosed
1.				
2.				
3.				

* NAAS Journal ID and Rating may be downloaded from the Website of National Academy of Agricultural Sciences (www.naasindia.org).

B. Review articles (Referred Journals)

1.	
2.	
3.	

C. Books /Book Chapter

1.	
2.	
3.	

D. Manuals

1.	
2.	
3.	

E. Others

1.	
2.	
3.	

17. International Exposure, if any

S. No.	Post Assignment	Organization/ University	Area of Assignment	Contribution Done	Duration		Page No. of proof enclosed
					From	To	
1.							
2.							
3.							

18. Summer/Winter School/Refresher Course and Seminar/ Symposium etc. organized

S. No.	Topic of the Summer/Winter School/ Refresher Course and Seminar/ Symposium	As Course Director/ Course Coordinator	Sponsored by	Duration and Date	Page No. of proof enclosed
1.					
2.					
3.					

19. Special Attainments [novel technology developed (patent, prototype, genetic stock, variety, process, concept, concept, methodology/ new inventions/ gene pool identified), success story of technology disseminated or commercialized etc.]

S. No.	Attainment(s)	Institute/ Organization	Year	Page No. of proof enclosed
1.				
2.				
3.				

20. Membership of Professional Societies:

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- 21. Institution Building/Service Functions** [creation of totally new institution, laboratory, field facility etc., that has bearing on improved standards or resource generation can be given. Likewise, in case of adding new equipment, mention can be made as to how many other scientists benefited by such addition. Similarly, encouraging HRD, plan implementation and/or monitoring of progress to show better results, successful execution of major projects, etc.]

S. No.	Name of the facility	Year	Standard Improved	Resource generated	Page No. of proof enclosed
1.					
2.					

Service Functions: Miscellaneous tasks by applicant [Preparation of review reports, proceedings and other similar works; Duties performed for at least one year or more as warden, Library I/c, Student Welfare Officer, Animal House I/C, Farm I/C, Common Instruments Lab. I/C, Assistance, PME Cell; Assistance at least for one year in coordination and monitoring progress of work of RAC, IMC, QRT, BOM, PME Cell, Academic Council and similar Advisory Committees of the Institute/University and Production and distribution of seeds/seeds/culture/planting materials /diagnostic services/ store purchase/maintenance of farms each at least for one year].

S. No.	Name of the Service performed	Year	Contribution made	Resource generated	Page No. of proof enclosed
1.					
2.					
3.					

- 22. Any other Experience of Administrative work, if any (please furnish details):**

Capacity	Nature of work	Duration in years

- 23. Key Achievements/ any other Information/ Qualifications considered to be relevant to the post applied for:**

- 24. References:** Please provide names of three persons who are not related to you and are familiar with your work / professional experience / accomplishment:

	1	2	3
Name and Address			
Contact Address			
Email:			
Phone (landline) With STD Code:			
Mobile Phone no.			
Fax with STD code			

- 25. Have you ever been punished during your studies at College/University? (Yes/No):**

- 26. Have you ever been punished during your service or convicted by a court of law? (Yes/No):**

27. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No) :

28. Do you have any case pending against you in any court of law? (Yes/No) :

DECLARATION

I hereby declare that the entries in this application are true to the best of my knowledge and belief, and also that I have not concealed any fact or withheld any information regarding my past services and record and that if any entry is found to be false or incorrect or that if at any time this is found to have been concealed, I will be disqualified for selection or if appointed, will be liable to termination without any notice or compensation.

I certify that I have read General Instructions carefully.

Date -----

Candidate's Signature -----

Place -----

No Objection Certificate

EMPLOYER REMARKS

(For in-service candidates only)

The applicant Dr./Mr./Mrs./Ms. -----who has submitted this application for the post of (Name of the Post) -----has been working in this organization (----- Name of organization) on the post of-----
----- on Temporary/Contract/ Permanent basis with effect from -----
to----- in the pay scale of (mention present basic pay, pay band and grade pay, if applicable)
-----.

Certified that no disciplinary/ vigilance action is contemplated or pending against the said applicant. There is no objection to his/her application being considered for the post by the CSAUA&T, Kanpur. In the event of his /her selection on the said post, he/she shall be relieved to join in CSAUA&T, Kanpur.

Date-----

Place:-----

Signature

Name:

Designation:

(With office seal)

(To be signed by the Employer)