PURNEA UNIVERSITY, PURNIA, PRATAP NAGAR PURNEA, BIHAR – 854301

Advertisement No.: PUP-GT-001/2025 <u>APPLICATION FOR TEMPORARY ENGAGEMENT OF GUEST FACULTY</u>

(to be filled by the candidates belonging to PWD category / Dependents of Freedom Fighter only)

Application ID :		*		
1. Post Applied for Guest Facult	y			
1. Full Name of the Applicant (S	ri/Smt/Kum/Dr.):			
2. Father's/Husband's/Guardian	's Name:			
3. (a) Are you Granddaughter / Grandson of Freedom Fighter Yes: No:				
(b) If yes attach self – attested	l copy of certificate issued by the	e Competent A	uthority.	
4. (a) Are you differentially able	d: Yes: No:			
(b) If yes please select nature of disability: 1. Locomotor Disability				
2. Visual Disability				
3. Hearing Disability				
4. Multiple Disabilities				
(c) Specify percentage of disability				
(d) Attach self – attested copy	of certificate duly issued by the	Competent Au	thority.	
5. Payment Details:				
Transaction ID / Reference Number	Payment Date & Time	Amount Paid	Payment Mode / Gateway.	
Declaration: I hereby declare that all the state of my knowledge and belief. I und at any stage of not satisfying advertisement, my candidature/e	derstand that in the event of any i the eligibility criteria accordi	nformation being to the req	ng found false or incorrec uirements of the relative	
Place :		Signature of the Applicant		
Date ·	Name			