



भारतीय समुद्री विश्वविद्यालय INDIAN MARITIME UNIVERSITY

(A Central University, Government of India)
Established by an Act of the Parliament in 2008

Visakhapatnam Campus - Gandhigram - Visakhapatnam – 530005

Phone: 0891-2578360 Fax: 0891-2577754

Ref:No. IMU/VSP/REG/SCPOS/ADVT/01/2013

| | | | | | | |
|------------------|--|-----|-------|------|--|------------|
| Post Code | | | | | | Photograph |
| Post applied for | | | | | | |
| 1 | Candidate's full name (including Surname / Family name) (in Capital Letters) | | | | | |
| 2 | Date of Birth | Day | Month | Year | Age as on (Closing date of receipt of application) | |
| 3 | Father's name | | | | | |
| 4 | Nationality | | | | | |
| 5 | Gender (Male/Female) | | | | | |
| 6 | Community (SC/ST/OBC) | | | | | |

7. Candidate's Name & Address for Correspondence:

| | Mailing Address | Permanent Address |
|---------------------------------|-----------------|-------------------|
| Name | | |
| Address with Pin Code | | |
| Email: | | |
| Phone: (Landline with STD Code) | | |
| Mobile No. | | |
| Fax No. | | |

8. Educational Qualifications:

| Examination Passed | Title of the Degree/ Course | Year of passing | Division & % of Marks/ CGPA | University / Board | Proof encl. Sl. No |
|---|-----------------------------|-----------------|-----------------------------|--------------------|--------------------|
| Matriculation/SSC/ 10 th | | | | | |
| Higher Secondary/ Intermediate (Plus 2) | | | | | |
| Bachelors' Degree | | | | | |
| Master's Degree | | | | | |
| Ph.D | | | | | |
| Any other Degree/ Diploma | | | | | |
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9 (a). Experience (Including Present Position/Employment):

| Designation & Scale of pay | Organization/ Institution | Period of Experience | | | Nature of work/ duties performed | Proof encl. Sl.No. |
|----------------------------|---------------------------|----------------------|-----|--------------|----------------------------------|--------------------|
| | | From | To | Years/Months | | |
| (a) | (b) | (c) | (d) | (e) | (f) | (g) |
| | | | | | | |
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9 (b). Experience in Industry/Ship Board in Marine Related field:

| Designation | Position | Period (Entries from CDC) | | | Nature of work/ duties performed/ being performed (Also mention level of teaching experience i.e. UG/PG) | Proof encl. Sl.No |
|-------------|----------|---------------------------|-----|-------------------|--|-------------------|
| | | From | To | Years/Months/Days | | |
| (a) | (b) | (c) | (d) | (e) | (f) | (g) |
| | | | | | | |
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10. Names & Addresses of Three Referees:

| Referee – 1 | Referee – 2 | Referee- 3 |
|--------------------------------|--------------------------------|---------------------------------|
| | | |
| e.mail : | e.mail : | e.mail : |
| Phone (Landline) with STD Code | Phone (Landline) with STD Code | Phone (Landline) with STD Code: |
| Mobile Ph: | Mobile Ph: | Mobile Ph: |
| Fax: | Fax: | Fax: |

11. DECLARATION

I hereby declare that the information given above is correct and to the best of my knowledge and belief. I fully understand that if it is found at a later date that any information given in the application is incorrect/false or if I do not satisfy the eligibility criteria, my candidature/ appointment is liable to be cancelled /terminated.

Signature of the Applicant**PLACE:
DATE:**

Endorsement by the PRESENT EMPLOYER

Forwarded to the Indian Maritime University-Visakhapatnam Campus, Visakhapatnam, India:

The applicant Dr./Mr./Mrs./Ms. _____,
who has submitted this application for the post of _____ in
the Indian Maritime University- Visakhapatnam Campus, Visakhapatnam, has been working in this
organization, namely _____ in the post of ____ _
in a temporary / permanent capacity with effect from _____ in the Scale of Pay / Pay Band of
Rs. _____. He/She is drawing a basic pay of Rs. _____.
His / Her next increment is due on _____.

Further, it is certified that no disciplinary / vigilance case is contemplated or is pending against the said
applicant. There is no objection for his/her application being considered by the Indian Maritime University.

(Signature & Seal of the forwarding officer)

Name: _____
Designation: _____
Place: _____
Date: _____

OTHER RELEVANT INFORMATION

Please give details of any other credential, significant contributions, awards received etc. not mentioned earlier.

| S.No. | Details (Mention Year, Value etc. where relevant) |
|-------|---|
| | |
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List of Enclosures where ever necessary

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| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

I certify that the documents enclosed to the duly filled in application and the information given in the application is to the best of my knowledge is true and correct in all respects.

Signature of the applicant

Place:

Date: