

**Non-Faculty Recruitment: 01/2024**

**PLEASE AFFIX HERE**

 **YOUR RECENT**

 **PASSPORT SIZE**

 **PHOTOGRAPH**

 **APPLICATION FORM**

 ***Post Applied – Accounts Officer/Finance Officer***

 **(On contract)**

**SECTION: A**

|  |  |
| --- | --- |
| Name ofCandidate |  |
| **First Name** | **Middle Name** | **Surname** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date of Birth (dd/mm/yyyy) |  | `Age (in Years) |  | Gender | Male / Female |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Social Category |  | **General** |  | SC |  | ST |  | OBC |

|  |  |
| --- | --- |
| Permanent Address  | Address for Communication |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Details  | Mobile No. |  | Email ID |  |
| Marital Status  | Married /Unmarried |  |

**SECTION: B**

|  |  |
| --- | --- |
| Educational Qualification |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Degree** | **University/Institute** | **Subjects** | **Year of Passing / Award** | **Percentage of Marks/****Final Grade** |
| Professional Qualification (CA/CMA (earlier ICWA) /CS/CFA) |  |  |  |  |
| Post Graduation (M.Com) |  |  |  |  |
| Graduation (B.Com) |  |  |  |  |
| Others |  |  |  |  |

**SECTION: C**

|  |  |
| --- | --- |
| Current PositionDesignation/ Name of the Institution/ Working sincePresent Pay and Allowances: |  |

|  |
| --- |
| **Work Experience *(In reverse chronological order starting with the most recent)*** |
| ***Designation Position (also indicate Permanent /Temporary*** | ***Employer*** | ***Experience***  | ***Period***  |
| ***Accounts***  | ***Others*** | ***From***  | ***To*** |
|  |  |  |  |  |  |
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***Total Experience in Years/Months: Accounts:***

 ***Others:***

*Experience of Administrative Responsibilities in Academic Institutions* ***(Indicate only Administrative Responsibilities)***

|  |  |  |  |
| --- | --- | --- | --- |
| *From*  | *To* | *Administrative Position* | *Major Responsibility*  |
|  |  |  |  |
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**SECTION: D**

**Knowledge in the use of Computers Programmes /Softwares (Mark Y or N for Yes and No) \* If Yes give details**

|  |  |  |
| --- | --- | --- |
| ***Computer Programme / Softwares*** | ***Yes/No*** | ***Using Since*** |
| *MS Office* |  |  |
| *Tally* |  |  |
| *ERP* |  |  |
| *SAP* |  |  |
| *Payroll Software* |  |  |
| *Any other Software related to the Accounts* |  |  |

**SECTION: E**

|  |  |
| --- | --- |
| Awards / Achievements |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Year of Award** | **Name of the Award** | **Awarding Body**  |  **Brief Description** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**SECTION: F**

***Knowledge of Language (Mark Y for Yes and N for No)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Language**  | **Read** | **Write**  | **Speak** |
| *English*  |  |  |  |
| *Hindi*  |  |  |  |
| *Others* |  |  |  |

**Section G:**

|  |
| --- |
|  **Name and Addresses of three references (with email and Mobile Number)** |
|  |  |  |

|  |
| --- |
|  **Please state the ways in which you can contribute to bringing modernization in Accounts department at Institute of Development Studies (IDS). *Answer in about 500 words. Use additional sheets if necessary.***  |
|  |

**Section H:**

You need to send filled form (without testimonials) to recruitment@idsj.org. Send filled form through post along with self-attested copies of the following documents to the Director, Institute of Development Studies, 8B, Jhalana Institutional Area, Jaipur, India-302004.

(a) Date of birth certificate

(b) Percentage of marks obtained at the Graduate/Post-Graduate degree examinations.

(c) Professional Qualification (if any)

(d) Certificate(s) regarding work experience

(e) Aaadhar Card Copy

(f) Any other certificate

**Declaration:**

I hereby declare that the information given by me in the Application is true, complete and correct to the best of my knowledge and belief and that nothing has been concealed or distorted thereof. If at any stage, I am found to have concealed/distorted any information or given any false statement, my application/appointment shall liable to be summarily rejected/terminated without notice or compensation.

**Date: Signature**