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Co-operative Academy of Professional Education (CAPE)

1st Floor, Co-Bank Towers, Vikas Bhavan P.O., Thiruvananthapuram – 695 033
Phone(Office) : 0471-2316236; Fax : 0471-2310049

Application for the Post of **Assistant Professor in**

1.	Name in full (in capital letters)					
2.	Permanent address					
	Address to which communications to be sent along with contact number(s).					
4.	Age (in completed years as on 01-01-2014) and Date of birth in Christian Era					
5.	Sex					
6.	Place of birth(Village, Taluk, District & State)					
7.	Religion and Caste (a) In the case of OBC/OEC categories Non Creamy layer certificate issued by the concerned Revenue authority should be furnished for claiming reservation benefits. (b) In the case of SC/ST candidates Caste certificate from the concerned authority should be produced for claiming reservation benefits.					
8.	Are you (a) citizen of India by birth and/Or by domicile ? (b) If not furnish details					
9.	Qualifications					
	Name of examination passed	Name of University/Board/Council etc.	Year of Passing	Class, Rank etc.	Percentage of Marks	Subject of examination
	B.E/B.Tech					
	M.E/M.Tech					

10.	Employment Experience : <i>(Separate list may be attached, if necessary)</i>		
	Previous Teaching Experience, if any		
	Sl.No	Institute/University Organization	Duration
11.	Present employer's full address(if any)		
12.	Any additional information which the candidate wishes to give in support of his application		
13.	Particulars of documents produced to prove credentials		
14.	Details of DD	DD No. :	
		DD Date :	
		Name of Bank :	
15.	References 1. 2.		

I hereby certify that the information given above is correct to the best of my knowledge and belief. I agree to bind myself to the conditions of service of CAPE that framed from time to time.

Place : Signature of the applicant.....

Date : Name in block letters.....

For office use only