## केन्द्रीय बौद्ध विद्या संस्थान

सम विश्वविद्यालय

चोगलमसर, लेह-लद्दाख

E-mail: cibsladakh@gmail.com Website: www.cibs.ac.in



## न्तुशःनाबुदःवदःयवैःदेवाःनावसःनाद्धवाःव्यवाःर्स्त्रेनःनाहेरः।वदः।

र्बे्र्याःक्ता हो यःन्यश

Contact No. 9419840937 Tel:+91-1982-264387

## Central Institute of Buddhist Studies (CIBS) (Deemed to be University)

			1, U.T. of Ladakh  ION FORM )		
	Advertisement Notice No. & Date	: _			
	Post for which applied	:			pp size photo
3. Name of the candidate in Capital Letter:					
	Mobile No. :	_ Alternati	ive No		
	e-Mail Address :				
	Father/Husband's Name		:		-
	Permanent Address : Village		Tehsil		_
Post C	Office District		Pin Code	State	
	Date of Birth :				
	the applicant belongs i.e.				
	Marital Status :				
	the applicant belongs i.e. ST/SC/OBC /EWS:				

Examination passed	Name of Board/College/ University	Subjects	Year of passi ng	Div .	% of Marks secure d

For the post of Assistant Professor  11. Research/Publication works if any :						
	ll date Experience if any:				T	
S.No	Name of Educational Institute/ University/Department where employed	Period of Employment From To		Fi	eld of experience	
1	- Improjeu					
2						
3						
For th	e post of Laboratory Technician, Co	ompute	r Instru	ctor and Date	Enti	ry Operator
S.No.	Name of technical course complete	where		e of the Institution ein the Technical se completed		Duration of course

13.	Details of present employment indicating the name of the organization, designation and scal Pay drawn, if any	ra-
13.	Whether convicted in any Court of law of the country.	:
Place	:	
Dated	:	Signature of the applicant

Note: 1. Incomplete application shall be rejected without giving any notice.