

LAMRIN TECH SKILLS UNIVERSITY

Employment Application Form

PUNJAB

Dear Candidate,

Thank you for taking the time to fill in the following application form. Please notice that some of the information in this form may be required for obtaining certain benefits in the event you become an LTSU employee.

Since LTSU is a Tech Skill University this is a generic application form. If you find some of the questions offending or illegal according to the laws of your country please do not fill in the answers.

We appreciate your cooperation and your time.

Good luck!

IMPORTANT: **PLEASE FILL THE INFORMATION in BLOCK LETTERS ONLY

** All dates must be entered in **DD/MM/YY** format

Position Applied For :									
How did you get to know about the requirement				Name					
			Agency						
Employee	Referee (Nam	e & Emplo	yee ID)						
	Newspap	er Adverti	sement						
			Other						
Personal Details									
Name (Last)		(First)		(Midd	ile)				
Current Address:		Photo							
Darmanant Address (It	different then	auront odd	**************************************						
Permanent Address (If different then current address)									
Contact Number:				Alterna	te Contact No. /Name				
Date of Birth:		Email Address:							
PAN Number :		Nationality:							
Aadhar Card No:									
Passport Number: Date of Issue			1 1	Date of Expiry	1 1	Place of Issue			
If not, have you applie	Place and Date	of Applica	ation:						
□ _{yes} □ _{No}									
Blood Group:	Gender:		Marital Status :						
	Female	☐ Male							

Emergency (Contact Deta	ails:							
Name:				Relationship	:		Contact Number:		
Address:						Email:			
Education D	etails					I			
	Acaden	nic Year	Speci	ialization /					Percentage / Marks Obtained
	From (mm/yy)	To (mm/yy)		lification otained	Name of the Unive	location			
Post- Graduation									
Graduation									
12 th									
10 th									
Any Other C	ertification /	Qualificati	ion / pro	fessional orga	anization you are a r	nember of.	lf so giv	e details	
			•						
Employment	t Details (sta			employment):	1	T		Last	<u> </u>
	dress of Prev mployer	ious T Bu	ype of usiness	Employment Dates (from- to)	Position & Responsibilities	Name Superv		Drawn Salary	Reason for Leaving

Total Work Experience:				Total Experience in the current role:					
Notice Period:				Earliest DOJ (if months)	ade an	/ /			
Expected Com	pensation from L	TSU:		,					
Yes	□No	your current Universit		If yes, mention the Bo		nt Bond End Date	/ /		
Have you ever been employed with LTSU or its affiliates before? No				If yes, mention the month and year of your start and end of service:					
Have you every employment b		LTSU or its affiliate	s for	When: Where:					
				Interviewed By:					
☐ Yes	☐ No			Offer Made: Yes No					
					or not				
Has your spot employment?	use ever applied	to LTSU or its affiliat	es for	When: Where:					
☐ Yes	□No								
Have you ever committed a felony or crime?									
Professional References:									
Name Position/Designation			·	Jniversity Name	C	Contact Number	& Email ID		
1.									
2.									
Additional Information:									
Please feel free to provide any additional information in support of your application for employment with LTSU:									
Bank Details (Proof attach photocopy of Cheque/ Cancel Cheque)									
Branch	Bank Name IF			Code		Account Nu	ımber		
	ails (Proof Attach								
ESI NO		YES NO E	PF NO				YES NO		

Family Detail								
_								
Sr.No	Name	Relation Self	Date of Birth	Aadhar Chard	Pan Card	Occupation		
1. 2.		Spouse						
3.		Son						
4.		Son						
5.		Daughter						
6.		Daughter						
7.		Father						
8.		Mother						
9.								
Brief outline the responsibilities in your current job (if currently employed) Draw your current Organization Chart (Above you up to the Hand two levels below you)								
	Candidate's Declaration:							
I hereby declare and acknowledge that all details provided by me in this application and in the entire recruitment process are true in all details. I am aware of the fact that if any of the details are found to be false, this may cause my immediate dismissar from the University. I acknowledge that the Universities decision regarding my employment is based on the details I provide and on their being accurate and complete and I agree that the University may use these details for the purpose of determining whether or not to offer employment to me. I agree that the University may hold and process the information, which I provide in this form together with any additional information, which I may supply to the University during my employment. I agree to the University disclosing or transferring such information to other companies in the Group or to third parties (including external consultants) both to process my application and, if successful, during my employment.								

Signature ___

Date ___

Name_