



RASHTRASANT TUKADOJI MAHARAJ NAGPUR UNIVERSITY, NAGPUR

(A State University established by Maharashtra Public Universities Act, 2016)

DEPARTMENT OF DR. AMBEDKAR CHAIR

(Dr. Ambedkar Foundation An Autonomous body under the Ministry of Social Justice & Empowerment, Delhi)

Application Form No.....

(For office use only)

Advertisement No.: RTMNU/Chair/

Dated: /11/2026

To

THE HEAD,
Department of Dr Babasabeb Ambedkar Chair
Dr Ambedkar Janmashatabdi Bhavan
North Ambazari Road, Ramdaspath
Nagpur - 440 010 (M.S.)

*Affix recent
passport size
photograph with
self-attestation*

Sub.: Application for the post of Research Project Associate/ Assistance (on a contract basis)

Sir,

I hereby submit my application for the post mentioned above with the following Details:

APPLICATION FORM

(Please read the general instructions, Terms & conditions before filling the form)

1. Application Fee (Non-Refundable)				
Receipt No.	Date	Amount (Rs.)		

2. Personal Details (In Capital Letters)				Enclosure No.
Full Name (Surname First)				
Date of Birth (DD/MM/YY)		Age (In Years) as on / 11/2026		
Gender (Male/Female/other)		Marital Status		

Nationality		Religion	
Category with Caste (SC/ST/VJ-A/NT(B/C/D)/ OBC/OPEN/PH/EWS/SBC)			
Particulars of Physical Disability, if Applicable			

10. TOTAL NO. OF ENCLOSURES ATTACHED: _____

I declare that all information submitted in this application and its accompanying documents is valid, complete, and correct to the best of my knowledge and belief. I accept that if any information is found false, incomplete, or incorrect, my candidature/appointment for the post of **PROJECT ASSOCIATE/ASSISTANT (on a contract basis)** is liable to be cancelled/terminated at any stage.

DATE: _____

PLACE: _____

(Signature of Applicant)

RASHTRASANT TUKADOJI MAHARAJ NAGPUR UNIVERSITY, NAGPUR

Statement showing particulars of applicant for the Post of "PROJECT ASSOCIATE/ASSISTANT" (On Contract basis)

Name & Correspondence Address of the Applicant with Contact No. & E-mail ID	Age / Date of Birth	Category (Caste)	Academic Attainments			Experience (Yr./Month/Days)			Publications, if any	Any other Information, if any
			Degree Awarded	Year of Passing	% / CGPA	Teaching	Research	Admn.		
1	2	3	4	5	6	8	9	10	11	12
									International: Own: _____ Joint: _____ Total: _____ National: Own: _____ Joint: _____ Total: _____	

I hereby declare that all my entries are valid to the best of my knowledge and belief. If anything is found false at any stage, my candidature for the post_____may be cancelled without assigning any reason thereof.

Signature of Applicant: _____

Name of Applicant: _____

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