मौलाना आज़ाद राष्ट्रीय प्रौद्योगिकी संस्थान, भोपाल–462003

(शिक्षा मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)

MAULANA AZAD NATIONAL INSTITUTE OF TECHNOLOGY, BHOPAL-462003

(An Institute of National importance under Ministry of Education, Govt. of India)

Note: Prospective candidates are advised to study the **Instructions** carefully and then fill up the application precisely and to the point in all respects. No column should be left blank. **Incomplete application will be rejected**. Candidates may attach additional sheets, if required.

APPLICATION FORM

Advertisement No:	AB/Estt/Cont./CC/2026/758	Affix recent passport size photograph duly signed by the candidate
Date:	04/06/2026	
Post Applied For	Visiting Clinical Psychologist (on contract)	

1.	**Personal Information**								
	Name of Applicant (in full capitals)								
	Father's name								
	Mother's Name								
	Date of Birth & Age (As on last date of receipt of Application-proof of DoB to be enclosed)	DD		MM		YY		Years	Months	Days
							Age as on 22/06/2026			
	Nationality						Religion			
	Category (SC/ST/OBC/EWS/UR/Ex-serviceman)									
	Gender						Marital Status			

2. Whether Person with Disability Yes* ☐ No ☐ (Put ✓ mark)

*If yes **A** ☐ B ☐ C ☐ D ☐ (Put ✓mark)

A (a) - Blindness & Low Vision; B (b) - Deaf & Hard of hearing
C (c) - Locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims & Muscular dystrophy
D (d) - autism, intellectual disability, specific learning disability and mental illness;
E (e) - multiple disabilities from amongst persons under clauses (a) to (d) including deaf-blindness
(*Attach a certificate from the competent authority as prescribed under government rules)

3. Complete Postal address with Pin code

	For Correspondence address			Permanent Address		
	PIN			PIN		
	Other Contact information					
	Phone No with STD Code	R		Mobile	1	
		O		Mobile	2	
	E-mail					

4.	Educational Qualifications					
	Name of Degree/Diploma	Subject / discipline	University/ Institution/Board	% of Marks	Grade/ Div.	Year of passing
	10^{th}					
	12^{th}					
	Bachelor's degree					
	Master's degree					
	Ph.D.					
	Details of RCI Registration					
	Desirable qualification (if any)					
	Others (if any)					

CGPA to % (percentage) conversion certificate should be obtained from the Institute/University if same is not mentioned in the mark sheet/degree. Candidate should only specify percentage in the relevant column.

5.	Detail of Experience (In reverse Chronological order)(Attach extra sheet, if needed)									
	Organization	Post	Period		Duration		Pay level	Nature of Responsibilities	Temp/ Regular/ Permanent	Reason of quitting
			From	To	Y	M				
a.										
b.										
c.										
d.										

6.	Details of workshop/Training programmes, etc. attended			
	Conducting Organization	Title of programme	Duration of programme	
			From	To
a.				
b.				
c.				
d.				
e.				

7.	Character & Antecedents Report.	
	Subject	Comments
a.	Have you ever been subject to any disciplinary action, as a student and/or as an employee, If so give full details.	
b.	Have you ever been dismissed/suspended from service/employment, if so please give full details	
c.	Were you involved in any criminal case, If yes, give full details	
d.	Is any criminal case pending against you in the court, If yes, give full details	

8.	Other relevant information	

9. Please Provide a Statement of Purpose in not more than 500 words describing how you are suitable for the requirements of the advertised post (please attach separate sheet).

10	Name and Address of minimum two References. (Referees should be familiar with your academic/ Professional Work and should not be relatives)	
	Name & address	Name & address
	Designation & organization:	Designation & organization:
	Phone:	Phone:
	Mobile:	Mobile:
	E-mail:	E-mail:

11. Details of Enclosures (Important: all the enclosures should be self-attested and serially numbered):

Sl. no.	Description	Page no.

DECLARATION		
I, hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all entries in this form, as well as, in attached sheets are true to the best of my knowledge and belief. At any stage if any of the information furnished by me is found to be false or incorrect, suitable action may be taken against me. If selected, I promise to abide by the rules and regulations of the Institute.		
Date:		
Place:		Signature of candidate