



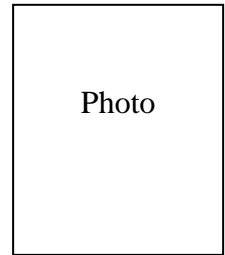
ALAGAPPA UNIVERSITY
 Established by an Act of the Govt. of Tamil Nadu and recognised by UGC
 Accredited with A+ Grade by NAAC (CGPA:3.64) in the Third Cycle
 Karaikudi – 630 003, Tamil Nadu, India



DIRECTORATE OF ONLINE PROGRAMMES

APPLICATION FORM for INFORMATION OFFICER

Name of the Applicant :
 Age :
 Date of Birth :
 Qualifications :
 Mobile No :
 E-mail ID :



Communication Address:

Permanent:

Temporary:

Area of Operation :

Facilities available: (Please Tick)

Computer with Net Connection Scanner Printer

Bank details:

Account Holder Name: Account Number :

Bank : Branch :

MICR Code : IFSC Code :

Encl: 1) Xerox copy of Aadhaar 2) Xerox copy of Passport for Applicant from abroad

Declaration

I hereby declare that the information given in this application are true and correct to the best of my knowledge and belief. In case any information given in this application proves to be false or incorrect, I shall be responsible for the consequences. I also declare that if any information provided by me is found false, my candidature may be rejected at any point of time. I assure that I will not indulge in collecting money from the candidates in any form with regard to admission, examination, etc.

Place:

Date:

Signature

Note: Applicants are requested to send the filled in applications to the Director, Directorate of Online Programmes, Alagappa University, Karaikudi – 630 003. Scanned copy of the application may be sent to op@alagappauniversity.ac.in.