



Form for UMS Web Portal

| First Name (IN CAPITAL LETTERS) |
|---|
| Middle Name (if any) |
| Last Name |
| Employee ID |
| Job Title/Designation |
| Title (eg. Prof/Dr/Mr) |
| Gender: Male/Female/Others |
| Office Phone No |
| Official E-mail ID |
| Purpose of Use |
| School/Admin Code |
| Dept Code |
| Father's Name |
| Mother's Name |
| Employee Type: Teaching/Non-Teaching/Academic |
| Employee SubType: Regular/Contractual/Outsource |
| PAN No |
| Marital Status: Single/Married/Others |
| Aadhar Number |
| Alternate Phone Number |

| Alternative E-Mail ID | ····· |
|------------------------------|-----------------------------------|
| Current City of Residence | |
| Postal Code | |
| | |
| | Signature of the User |
| | Forwarded by (HoD/Dean/In-charge) |
| | |
| Approved by Convener, E-Gov. | |
| | For office use |
| Login ID | issued to Mr/Ms/ <u>Dr</u> |
| | |
| | Issuing person |
| | |
| Signature, Convener E-Gov | |