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|  |  | **Döküman No:** | RTEÜ.FR.0001 |  |
|  | Sözleşmeli Personel (657-4/B) Başvuru Ve Atama Formu | **Yayın Tarihi:** | 23.07.2019 |  |
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| **KİMLİK BİLGİLERİ** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **1.** | **T.C. KİMLİK NUMARASI:** |  |  |  |  |  |  |  |  |  |  | |  | |  | | | | |  | | | **2.** | **ADI:** …..…………………….………………… | | | | |  |  |  |  |  |  | |  | |  | |  | | |  | | | **3.** | **SOYADI:** …..………...………….………………… | | | | |  |  |  |  |  |  | |  | |  | |  | | |  | | | **4.** | **BABA ADI:** …..…………………….………………… | | | | |  |  |  | | | | | | | | | | | F O T O Ğ R A F | | | **5.** | **ANNE ADI:** …..……….………….………………… | | | | |  |  |  | | | | | | | | | | | |  | | | **6.** | **DOĞUM TARİHİ:** ….../..…./..…..…. (GG/AA/YYYY) | | | | | |  |  | | | | | | | | | | | |  | | | **7.** | **DOĞUM YERİ:** …………………………………… | | | | |  | **8.** | **CİNSİYETİ:** | | | | E | |  | | K | |  | |  | | | **8.** | **NÜFUSA KAYITLI OLDUĞU İL/İLÇE :** …………………………………………………………..… | | | | | | | | | | | | | | | | | | |  | | | | | | |
| **ÖĞRENİM BİLGİLERİ** | **9. EN SON BİTİRDİĞİ OKUL: ………………………………………………………………………..........**  **10. MEZUNİYET TARİHİ:** ….../..…./..…..…. (GG/AA/YYYY) | | | | |
| **İLETİŞİM BİLGİLERİ** | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **11.** | **MERNİSTE KAYITLI İKÂMETGAH ADRESİ: (E-DEVLETTEN KONTROL EDİLEBİLİR.) …………….**………………..……..……  ..…………….…………………………………………………………….………………………………………….…………………………… | | | | | | | | | | |  | | **12.** | **SEMT/İLÇE:**………………………….…… | |  |  |  |  |  |  | | | **13. İLİ:**………..……………………… | | | **14. SABİT TEL. NO:** …...……..……………… **15. GSM NO:**………………….………………. | | |  |  |  |  |  | |  | |  |  | | **16.** | **E-POSTA ADRESİ :**………………………………………………………………………… | | | | | | | | | | |  | | | | | |
| **YERLEŞTİRME BİLGİLERİ** | **17. BAŞVURDUĞU POZİSYONUN UNVANI:** …………………………………………… **İLAN KODU:** ………………….. | | | | |
| **SAĞLIK**  **DURUMU** | **18. GÖREVİNİ DEVAMLI YAPMASINA ENGEL OLABİLECEK BİR HASTALIĞININ BULUNUP BULUNMADIĞI:**  (657 SK.’nun 53 üncü maddesi saklı kalmak üzere)    **VAR YOK** | | **HASTALIĞI BULUNUYORSA TAM TEŞEKKÜLLÜ HASTANEDEN ALINMIŞ SAĞLIK KURULU RAPORUNUN OLUP OLMADIĞI**  **VAR YOK** | | |
| **DİĞER BİLGİLER** | **19. ASKERLİĞİN YAPILIP YAPILMADIĞI:**  **YAPILDI YAPILMADI** | **YAPILDIYSA ŞEKLİ VE TARİHİ:**  ………………………………… | | **YAPILMADIYSA SEBEBİ:**  **………………………..** | **SEFER GÖREV EMRİ**        **VAR YOK** |
| **20. ADLİ SİCİL KAYDININ**  **OLUP OLMADIĞI:**  **VAR YOK**  …  …………………………………..…… | **VARSA MAHKUMİYETE KONU SUÇ:**  ……..………………………… | | **MAHKUMİYET SONUCUNDA VERİLEN CEZA:**  ………………………………………… | |
| **RECEP TAYYİP ERDOĞAN ÜNİVERSİTESİ REKTÖRLÜĞÜNE**  **Yukarıda bilgileri verilen sözleşmeli personel pozisyonuna başvurmak istiyorum. İlanda belirtilen şartları taşıdığımı ve istenen belgelerin ekte olduğunu beyan eder, 657 sayılı Devlet Memurları Kanunu'nun 48. maddesinde aranan genel şartları taşıdığımı, yukarıda vermiş olduğum bilgilerin doğruluğunu ve gerçeğe aykırı beyanda bulunduğum takdirde atamamın yapılmayacağını, atamam yapılmış ve göreve başlatılmış olsam dahi atamanın iptal edileceğini ve Türk Ceza Kanunu'nun ilgili hükümlerinin uygulanacağını kabul ediyorum.**  **Gereğini saygılarımla arz ederim. …./…../20…**  **Adı ve Soyadı**  **İMZA** | | | | | |

**AÇIKLAMALAR:** Bu form aday tarafından eksiksiz ve doğru olarak doldurulacaktır. Adaylar ilânda belirtilen belge suretlerini bu forma ekli olarak başvuru görevlisine vereceklerdir.