## APPLICATION FORM

Affix Latest
Colour
Passport
Size Photograph
attested by
Gazetted Officer

with seal

1	Post to which applied:														
	Faculty														
2	Name in full (Block letters)			M	Mr./Ms./Dr.										
					lni (ni i										
3	Date of Birth of the applicant				Place of Birth										
4	Father's/ Husband 's name				Occupation:										
5	Postal Address														
	Telephone No. w	e No. with STD Code (O)				(R)			)						
	Mobile No:					Email:									
6		Give the following particulars of Educational Qua				ficatio	ne (Comn			SSC or equi	ivalent e	vamir	ation	) Where a	
U	qualification has											<b>A</b> aiiiii	iation	i). Where a	
							ne of the				Class	or			
	Name of t	I	Name of the School/College and				oard/			h Degree/ as been	DIVISIO				
	Examination/	Degree		Place		Universi		obtaine			with %		1		
	(1)		(2	))		(3)			(4)		Marks (5)		(6)		
			(2)						(1)				(0)		
7	Give chronolog	ical order	details of	your e	mpl	oyme	ent								
	Name and Ad					cale of		Period		Tota		Basic Pa		Regular /	
	Institution /	Institution / Office		Pa	Pay				Perio		& Gross		Adhoc.		
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	ther qualified in					Yes /	′ No:								
	Yes, Year in which qualified Year : (Enclose attested copies of the certificates)														
8	Have you published any papers or text books? If so, give particulars and if possible enclose copies of papers/														
		ooks clearly mentioning the names of international/National Journals in the case of papers published and onferences participated for Presenting papers, names of publishers in the case of Text books.													
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l +	Seminars							kshops							
	Text Books							nograph							

9	Membership in professional bodies:	
10	No. of Ph.Ds guided if any (Give details on a separasheet)	te
11	Awards received if any (Give details on a separate sheet)	
12	Languages known:	
13	Details of experience:	
	Teaching to post- graduate classes with details subjects handled, course, semester, year etc., (Encl separate sheet if required)	
	Guiding Research	
	Industrial Experience	
	Administrative Experience	
14	Additional Remarks: (Applicant may mention here special qualification acquired or experience gained organization, administration, teaching, sports, NCC not given above.)	in
	DECLARATION TO BE SIGNATION TO SIGNATION TO SIGNATION TO SIGNATION TO SIGNATIO	NED BY THE APPLICANT this application are true to the best of my knowledge.
	Date:	
	Place:	SIGNATURE OF THE APPLICANT
	DECLARATION TO BE SIGN	ED BY THE CONCERN COLLEGE
	I certify that all the entries made in the applimaintained in this Office.	eation are correct according to his/her records
	I recommend that his application may be con	sidered.
	Fu	ll Signature
	D	signation: PRINCIPAL
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