

## Application Form

Affix Latest  
Colour Passport  
Size Photograph  
attested by  
Gazetted Officer  
with seal

**1. Post to which applied :**

(a) Department:

(b) Designation:

**2. Name in Full (Block letters) :**

**3. Date of Birth :**

**4. Father's/ Husband 's name :**

**5. Postal Address :**

i. Telephone Numbers with STD Code (O) :

ii. Mobile Number :

iii. E mail:

**6. Give the following particulars of Educational Qualifications (Commencing with SSC or equivalent examination). If a qualification has been obtained by private appearance, this should be specifically mentioned.**

Name of the Examination/ Degree	Details of School/College	Name of the Board/ University	Year of Award	Class & % of Marks	Subjects taken for specialization
(1)	(2)	(3)	(4)	(5)	(6)

**7. Give chronological order details of employment**

Name and Address of Institution / Office	Post Held	Scale of Pay	Period		Total Period in each cadre	Basic Pay & Gross Pay	Regular / Adhoc. University ratified
			From	To			
1	2	3	4	5	6	7	8

**8. Whether qualified in NET/SLET/SET/GATE** Yes / No: \_\_\_\_\_  
If Yes, Year in which qualified : \_\_\_\_\_ (Enclose attested copies of the certificates)

**9. Details of Research Publications:**

<b>Sl.No.</b>	<b>Title of the Publication with Page Numbers</b>	<b>Journal Name</b>	<b>Month &amp; Year of Publication</b>	<b>ISSN/ISBN Number</b>	<b>Specify.... SCI/UGC/AICTE/ Scopous (UGC Care List Group-II)</b>

**10. Details of Ph.Ds Guided if any :**

11. Details of Memberships in Professional Bodies:

11. Details of Awards received, if any:

12. Any Other Information:

### **DECLARATION BY THE APPLICANT**

I hereby declare that statements made in this application are true to the best of my knowledge. Further, I understand that I am eligible for the Post applied as per the University Guidelines.

Date:

Place:

**SIGNATURE OF THE APPLICANT**

### **DECLARATION BY THE CONCERNED COLLEGE**

I certify that all the entries made in the application are correct as per our College Records.

I also certify that this Candidate is eligible for the Post applied as per the University Guidelines.

Hence, I recommend his application for which he/she is applying.

**Full Signature** \_\_\_\_\_

**Designation: PRINCIPAL**

**Office Seal** \_\_\_\_\_

### **NOTE:**

The Principals and applicants are here by informed to enclose the following Xerox Copies of certificates as a Proof of claim.

- **Qualification:** Original Degree Certificates of Ph.D/ M.Tech/M.Pharm/PharmaD/ B.Tech/ B.Pharm (as case may be) along with Proof of Percentage Marks.
- **Experience:** Appointment Letter(s), Service Certificate(s), Joining and Relieving Certificates.
- **Research Publications:**
  - (i) Full Length Publication along with ISSN/ISBN Number.
  - (ii) Proof of publication in SCI journals / UGC / AICTE approved list of journals/Scopus (UGC Care List Group-II).
- **Doctoral Guidance:** Thesis Copies/Gazette Notifications/Any other supporting documents.