

**ONLINE APPLICATION FORM FOR FACULTY POSITION**

**A. PERSONAL DETAILS**

1. Post applied for: \_\_\_\_\_ Area: \_\_\_\_\_
2. Name in Full: \_\_\_\_\_
3. Date of Birth \_\_\_\_\_ (DD/MM/YYYY) Age : \_\_\_\_\_ years      4. Gender: \_\_\_\_\_
5. Marital Status: \_\_\_\_\_ 6. Nationality \_\_\_\_\_ 7. Category \_\_\_\_\_
8. Father's Name/Husband's Name: \_\_\_\_\_

**B. FULL ADDRESS FOR CORRESPONDENCE:**

1. \_\_\_\_\_
- \_\_\_\_\_ 2. Pin Code \_\_\_\_\_ 3. State \_\_\_\_\_
4. Phone No: \_\_\_\_\_ 5. Mobile No: (1) \_\_\_\_\_ (2) \_\_\_\_\_
6. Email Address (1) \_\_\_\_\_ (2) \_\_\_\_\_

**C. ACADEMIC DETAILS**

Doctoral Details:

- Degree: (Ph.D, FPM etc.) \_\_\_\_\_
- Institute/University \_\_\_\_\_
- Topic: \_\_\_\_\_
- Faculty Advisor/Supervisor: \_\_\_\_\_
- Registration Date: \_\_\_\_\_ (DD/MM/YYYY)
- Submission Date: \_\_\_\_\_ (DD/MM/YYYY) (expected date, if not yet submitted)
- Date of Award of Degree: \_\_\_\_\_ (DD/MM/YYYY)

*(Note: Research Experience excludes the experience gained while pursuing PhD)*

**D. EDUCATIONAL QUALIFICATION\***

	DEGREE	YEAR	INSTITUTE/ UNIVERSITY	SPECIALISATION	DIVISION/ GRADES
PG					
PG (Additional)					
UG					
UG (Additional)					
XII					
X					
Others (if any)					
Others (if any)					

\*Please indicate your position in University/Board Merit List if any

**E. TEACHING EXPERIENCE**

Institute / Univ.	Designation	From	To	No. of Months	Area/Subjects	AGP (Rs.)/ Pay Scale

**F. INDUSTRY EXPERIENCE**

Organization	Designation	From	To	No. of Months	Remuneration (Rs/per month)

**G. RESEARCH PROJECTS UNDERTAKEN**

Name of the Research Project	Co – Investigator	Funding Agency	Amount	From (Date)	To (Date)

**H. PUBLICATION IN JOURNAL (Please mention details of 10 best publications)**

Journal	Year	Title of the paper	Co-author	Vol.	Page No.	No. of Citations (Scopus/Web of Science/ICI)


**I. BOOKS AUTHOR/EDITED**

Name of the Book	Co-Author	Publisher	Year of Publication

**J. FPM / Ph.D. SUPERVISION**

Name of the Scholar	Year of Regn/Year of Awarding Degree	Topic of Research	University/Institute	Co Supervisors

**L. CONSULTANCY ASSIGNMENTS UNDERTAKEN**

Name of the Consultancy assignment	Organisation	Year	Status

**M. MDP / WORKSHOPS AND SEMINARS CONDUCTED**

Title of the Programme	Organization / Place	Year	Duration

**N. SCHOLARSHIP, HONORS & AWARDS (Brief Details)**


**O. EXPERIENCE OF ADMINISTRATIVE RESPONSIBILITIES;**

From	To	Position Held	Organization	Functions/Responsibilities

**P. NAME AND ADDRESS OF REFEREES**

Name of the Referee	Affiliation	Address	E-Mail	Contact No.

**DECLARATION:**

I hereby declare that the above information given by me is correct and complete to the best of my knowledge and no information has been distorted. If it is revealed that I have concealed or distorted any information my application may be rejected without any notice.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Place: \_\_\_\_\_