

**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 as on 31.10.2017 : \_\_\_\_\_ 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: \_\_\_\_\_
6. Email Address \_\_\_\_\_

**C. POSITION APPLIED FOR:**

1. Position Applied for: \_\_\_\_\_
2. Area: \_\_\_\_\_ Specialization \_\_\_\_\_
3. Did you apply for any post in this Institute: \_\_\_\_\_
4. If yes, please provide details \_\_\_\_\_

**D. 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: \_\_\_\_\_

(Research Experience excludes the experience gained while pursuing PhD)

**E. 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

**F. TEACHING EXPERIENCE**

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

**G. INDUSTRY EXPERIENCE**

Organization	Research Projects	From	To	No. of Months	GP (Rs.)

**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

**K. RESEARCH PROJECTS UNDERTAKEN**

Name of the Research Project	Co – Investigator	Funding Agency	Amount	Year	Status

**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. ANY OTHER RELEVANT INFORMATION THAT YOU MAY LIKE TO ADD**

**Q. 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: \_\_\_\_\_

Email : \_\_\_\_\_