Proforma		7. Colleg		_		ofessor	Paste here your passport size
Date:							photograph
1. Application for App	pointment	as		in			
2. Pay Scale	Mir	nimum Pay	Accepta	ble			
Name (in block let	ters)						
3. Father's Name(in b	olock lette	rs)					
4. Present postal add	ress (in bl	lock letter)					
Telephone:					Pin Cod	le:	
E-mail				_			
a) Nationality							
b) Whether belongs to	SC/ST/F	Ex-servicer	nen/Han	dicapp	ed (attacl	n proof)	
c) Marital Status							
5. a) Date of Birth	L						
b) Age as on th	e last date	e for subm	ission of	comple	eted appli	cation for:	
years:	Mon	ths:		Day	/s:]	
6. a) Educational	qualificati	ion (from I	 Matricula	tion on	wards)	-	
Examination	Univ./ Board	Year & Month of passing	Marks Obtaine / Total Marks		rcentage Division	Subjects	Position in Univ. & College if any
Matric							
10+2 /Pre.Med./ Pre. Engg.							
BA /B.Sc./B.Com							
M.Com/M.A/M.Sc.							
B.Ed.							
M.Ed.							
M.Phill							
Ph.D.(with title)							
UGC (NET/SLET)							
Any other Exam (Please Specify)							

7. (a) Have you ever been prosecuted/sentenced by the court of Law, if so give detail?_____

(b) Have you ever dismissed from service? if so, give detail_____

8. List of previous employment in order (Starting with most recent post held.

Name & Address of	Date of Joining	Designation	Nature of	Basic Pay	Reason for
College/Institution	/Leaving		Job	P M & grade	leaving

9. Total experience (Attach Annexures for details)

10. (a) Present Basic Pay Rs._____ (b) Pay Scale Rs._____

(c) Period required for joining the post _____

- 11. Membership of Professional Societies , if any:
- 12. National /International awards/Fellowships.
- 13. Paragraph of self-evaluation regarding different fields of activity relating to the Job:

14. Any other relevant information_____

15. List of Certificates & testimonials (Attested Copies)

(i)_____(iv)_____(iv)_____

(v)_____(vii)_____(viii)_____

CERTIFICATE

a) Certified that the contents given in the application form and the documents attached therewith are true and correct to the best of my knowledge.

Place: Dated:

(Signature of the applicant)

For College Office Use Only

Check List:	
1. Does the candidate fulfill essential qualification?	Yes/No
	37. / NT.

2. Does the candidate have the required minimum experience? Yes/No

- 3. Eligible/Not Eligible.
- 4. Special remarks (for Non-Eligibility)