

**APPLICATION FOR THE POST OF ASST. PROFESSOR IN PROVINCIALISED COLLEGES**

REF. ADVERTISEMENT NO. ....

Published in the ..... on.....

To,  
The Principal..... College  
District.....

Space for photograph  
please paste a passport  
size photo here.

|     |   |  |
|-----|---|--|
| 1.  | Name of the College<br>for which application submitted.   |  |
| 2.  | Post for which application submitted.   | Asst. Professor<br>Subject.....  |
| 3.  | Name of the <b>candidate</b> in <b>Block</b> Capital letters                                      |  |
| 4.  | Name of Father/Mother/ Husband<br><br>✓ Tick the appropriate word in regard to relation.          | Relation 1.Father 2. Mother 3. Husband.  |
| 5.  | Category, tick the appropriate serial no.   | 1. General 2. OBC/MOBC 3. SC 4. STP<br>5. STH 6. Differently able.                         |
| 6.  | Present Address of the candidate<br>Write your complete address<br>With PIN no                    |  |
| 7.  | Permanent address , if permanent and Present address are same write "do"                          |  |
| 8.  | Phone No. for contact   |  |
| 9.  | Your mail id which will be used for communication   |  |
| 10. | Age on 1 <sup>st</sup> January 2018 attach your HSLC Admit Card ( it is must)                     | YY MM DD   |
| 11. | Are you employed? Where? state the organisation and the post you hold there.                      |  |
| 12. | Whether you are applying through NOC from the Present employer? Enclose NOC from Present Employer |  |
| 13. | Educational Qualification   | Please fill in the Annexure A of this application and attach it. Nothing to be stated here |
| 14. | Teaching Experience in terms of number of years, please attach a certificate to this effect.      |  |
| 15. | Are you Proficient in Local Language? Tick the appr. column                                       | <input type="checkbox"/> YES <input type="checkbox"/> NO                                   |
| 16. | Are You Indian national , if so how   |  |
| 17. | Attach Your certificate for the Reserved category from appropriate authority                      |  |
| 18. | Details of Application Fee paid.  |  |

Date.

Certificate: I certify that the particulars stated above are true and nothing has been concealed.

Signature of Candidate in full

## Annexure A

### Details of Educational Qualifications.

**Attach this annexure at the top of the testimonials just below the Application Form**

With Photocopies. Give a serial no. on the copies and indicate the serial No. in the last column

|    | Particular                                  | Name of Board/<br>University | Year of Passing                          | Division secured | Percentage of Marks obtained by you. | Sl No. Of the document in the bunch of document submitted by you. (give a serial no. to each document you submit) |
|----|---|------------------------------|--|------------------|--------------------------------------|---|
| 1. | High School Leaving Certificate Examination |                              |  |                  |                                      |   |
| 2. | Higher Secondary Examination                |                              |  |                  |                                      |   |
| 3. | BA/BSc /BCom. Examination                   |                              |  |                  |                                      |   |
| 4. | Masters                                     |                              |  |                  |                                      |   |
| 5. | Ph.D./ M.Phil                               |                              | Date of Notification from the University | Not applicable   | Not applicable                       |   |
| 6. | NET   |                              |  |                  |                                      |   |
| 7. | SLET  |                              |  |                  |                                      |   |
| 8. | Other qualifications                        |                              |  |                  |                                      |   |

Details of Chapters/Publications with ISSN and ISBN Nos.

- 1.
- 2.
- 3.
- 4.
- 5.

Teaching Experience.

| SL | Name of the Institute | From ----- to<br>Specify period of teaching | Status of the Institute<br>Whether Affiliation from University received or not. |
|----|-----------------------|---|---|
| 1. |                       |   |   |
| 2  |                       |   |   |

Signature of Candidate

NB : Fill up the Form legibly and use CAPITAL letters .