



APPLICATION FORM FOR FACULTY POSITION

	Photograph
Post Applied For: Assistant Professor	
Department: <input type="checkbox"/> BBA <input type="checkbox"/> MBA <input type="checkbox"/> Both	
Date of Submission:	

PERSONAL DETAILS	
Name in full (Block Letters):	
Date of Birth (DD-MM-YY):	
Mailing Address:	
Permanent Address:	
Phone No.:	
Email ID:	
Marital Status:	
Category:	
State of Domicile:	
Nationality:	



ACADEMIC DETAILS				
Examination/Degree	Board/University	Specializations (if any)	Year of Passing	Score (% or CGPA)
SSC				
HSC				
Graduation				
Post-Graduation				
M.Phil.				
Ph.D.				
Other				

Whether UGC NET/MH-SET Qualified: Yes No (Month and Year of Passing: _____)

Whether Ph.D. awarded: Yes No (Month and Year of Award: _____)

EMPLOYMENT DETAILS				
S. N.	Name of Employer	Designation	Duration	Pay Scale



RESEARCH PUBLICATIONS (recent 5 publications, if any)			
S. N.	Title of Journal Publication in APA Format	ISSN/ISBN	Indexing
1			
2			
3			
4			
5			

Any Other Information in support of your candidature

Declaration:

I hereby certify that the above information is correct and complete to the best of my knowledge and nothing has been concealed or distorted. If at any time it is found that any of the above information is false / concealed / distorted then, my appointment shall be liable to be summarily terminated without any notice and compensation.

Place: _____

Name of the Candidate _____

Date: _____

Signature of Candidate _____