

ANNADA COLLEGE ,HAZARIBAG ANNADA CHOWK, COURT ROAD JHARKHAND- 825301

 $Email \quad : ann ada college @gmail.com$

www.annadacollege.ac.in

APPLICATION FORM FOR ASSISTANT PROFESSOR

			Affix a recent passport size
Department:			photograph
Date of Submission: _			here
1. Name in full (In Block Letters):	Dr./Mr./Mrs/Ms		
2. Date of Birth (DD/MM/YYYY):	<u>/ /</u>		
3. Father'sName:			
4. Mailing Address:			
		_Pin Code	
	Tel. No (with STD code)	Mobile	
	E-mail ID:		
5. Permanent Address			
		_Pin Code	
6. Marital Status:			
7. Nationality:			
8. State of Domicile:			
9. Religion:			
10. Category:	GEN/OBC/SC/ST/EWS		
11. Whether qualified UGC NET/JI (If yes, indicate the certificate no. ar	RF/SLET Yes No	/SET certifica	te)
12. Whether Ph.D. awarded: (If Yes, indicate the year of award: 13. Title of Ph.D. thesis awarded:			
Title of Filip. tilesis awarded.			

14. Academic Details

Examination/ Degree	Board/ University/ Organization	Subjects/ Specialization	Year of Passing	Division/ Marks in %
High School/ Secondary				
Higher Sec./Sr.Sec/ Intermediate				
Bachelor's degree				
Master's degree				
M.Phil				
Ph.D. degree				
Post Doctorate				

15. Details of Employment Experience: (Attach separate sheet if necessary)

S.No	Name of Employer/Status of Institute/University (Govt./Quasi Govt./Autonomous etc.)	Post held/ Designation	Period of Employment		Basic salary last drawn, pay scale and Grade Pay	Nature of duties	
	Govi./Autonomous etc./		From	То			

16. ResearchArticles/Papers published in Journals /Periodicals /Conference proceedings/Newspapers (Please attach separate sheet, if necessary)

SI.No.	Title of research article / paper(s)	Name of journal (with city/ country)	Whether Sole Author/ Co- author	Month & year of publication, volume, no. & page nos.	Whether Refereed/ non- refereed	ISBN/ ISSN No.	Level (Int./ Nat./ State/ Local)	Impact Factor

17.		led. (Please attach				Ly Devel	opinent	i rogiams, etc.	
SI.No.	1		Sponsoring Institution			Duration			
							Fromto		
	•			•		•			
18.					International Sem			es / Workshop/	
	(Pleas	e attach separate s	sheet, if necessar			-			
SI.No	Title/S presen	ubject of paper	Subject Conference			Duration From_		Whether the proceedings	
			Seminar		/ Name of City/			published Yes/No	
			Symposium Workshop	/	Country				
19. Li	st of E	nclosures:							
	(a) Copies of Mark-sheets & certificate of educational Qualification & certificate of clearing NET/SLET/SET etc.								
		(h) O : f	Waste of Table	O F	Na a a a a a a b	_			
		` ' '	•	•	Research experience		Laccentai	nce	
	(c) List of publications with details, reprints of papers published and acceptance letters (in case accepted papers/articles etc.)							100	
	(d) Copies of other relevant certificate & documents								
L	(u) Dopies of other relevant certificate & documents								
20. De	claration	on							
Loortif	v that t	the above informat	ion is correct on	d 00	molete to the best	of my l	nowledge	and bolief and	
I certify that the above information is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time it is found that any information is false concealed /									
distorted then, my appointment shall be liable to summarily termination without any notice / compensation & criminal case may be initiated against me under the relevant provision of Indian Penal Code and other laws							compensation &		
	as applicable.								

Signature of Candidate

Place:

Date: