

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

Email : annadacollege@gmail.com www.annadacollege.ac.in

## APPLICATION FORM FOR ASSISTANT PROFESSOR

Post Applied For:		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):		
3. Father'sName:		
4. Mailing Address:		
	Pin Code	
	Mobile Alt. No	
	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/JF (If yes, indicate the certificate no. and	RF/SLET	ate)
12. Whether Ph.D. awarded :	☐ Yes ☐ No	
(If Yes, indicate the year of award:	)	
13. Title of Ph.D. thesis 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					
Computer Proficiency					
Any other qualification					

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			Gross salary last drawn	Nature of duties
	COVERACIONOMOUS GLO.)		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.	attended. (Please attach separate sheet, if necessary)								
SI.No.	Name of Course attended			onsoring Ins	titution		Duration Fromto		
18.	Papers presented in Symposium. Indicate (Please attach separat	whether the Conf	eren				es / Workshop/		
SI.No	Title/Subject of paper presented		y) of / /	Organizing Institution/ Name of Country	and	Duration Fromto	Whether the proceedings published Yes/No		
19. De	eclaration:								
een cor opointm	hat the above information ncealed / distorted. If at nent shall be liable to su against me under the re	any time it is found mmarily termination	that an with	any informat out any noti	tion is fa ce / cor	alse concealed / mpensation & cri	distorted then, my minal case may be		
Place:									
Date: .					S	ignature of Cand	idate		
20. Lis	st of Enclosures								
1				2.					
3				4					
5				6	6				