



# S.M.J.N. (P.G.) COLLEGE, HARIDWAR, UTTARAKHAND

Managed by Shri Shravan Nath Math (a constituent of Taponidhi Shri Niranjani Akhara Panchayati, Haridwar)

## APPLICATION FORM FOR ASSISTANT PROFESSOR (CONTRACTUAL) 2021-22

Post Applied For: \_\_\_\_\_

Department: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Affix a recent  
passport size  
photograph  
here

1. Name in full (In Block Letters): Dr./Mr./Mrs/Ms \_\_\_\_\_

2. Date of Birth (DD/MM/YYYY): \_\_\_/\_\_\_/\_\_\_\_

3. Father's Name: \_\_\_\_\_

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. Whether qualified UGC NET/SLET  Yes  No

(If yes, indicate the year, and attach a photocopy of NET/SLET/SET certificate) \_\_\_\_\_

11. Whether Ph.D. awarded :  Yes  No

(If Yes, indicate the year of award: \_\_\_\_\_)

12. Title of Ph.D. thesis awarded: \_\_\_\_\_

\_\_\_\_\_

### 13. 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				

### 14. 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
			From	To		

### 15. Co-curricular, extension and professional development related activities

- 1) Student related co-curricular, extension and field based activities (such as extension work through NSS/NCC and other channels, cultural activities, subject related events, advisement and counseling).

SI No.	Description

- 2) Contribution to corporate life and management of the department and institution through participation in academic and administrative committees and responsibilities.

SI No.	Description

- 3) Professional development activities (such as participation in seminars, conferences, short term, training courses, talks, lectures, membership of associations, dissemination and general articles, etc.)

SI No.	Description

## 16. Research Publications

(a) Books- Self authored/co-authored/edited(Please attach separate sheet, if necessary)

Sl. No.	Title of the Book (s)	Whether Sole Author or Co-author	Name of Publisher (with country)	Month & year of publication	Refereed or Non-refereed	ISBN/ISSN No.



**18. Refresher Course, Methodology, Workshops, Training, Faculty Development Programs, etc. attended.** (Please attach separate sheet, if necessary)

Sl.No.	Name of Course attended	Sponsoring Institution	Duration From ___ to ___

**19. Papers presented in Regional/National and International Seminars/Conferences / Workshop/ Symposium. Indicate whether the Conference Proceedings are published.**

(Please attach separate sheet, if necessary)

Sl.No	Title/Subject of paper presented	Subject Conference Seminar Symposium Workshop	of /	Organizing Institution/ Name of Country	and City/	Duration From ___ to ___	Whether the proceedings published Yes/No

**20. Lecture/Special Lectures in Institutions of repute within the country and outside.** (Please attach a separate sheet if necessary)

Sl. No.	Title/Subject of Lecture delivered	Name and Place Institution	of	Date Lecture	of	Duration

**21. List of Enclosures:**

	(a) Copies of Mark-sheets & certificate of educational Qualification & certificate of clearing NET/SLET/SET etc.
	(b) Copies of certificate of Teaching & Research experience.
	(c) List of publications with details, reprints of papers published and acceptance letters (in case accepted papers/articles etc.)
	(d) Copies of other relevant certificate & documents

**22. Name and contact details of two referees**

Name	Profession/Position	Institutional Affiliation	Address and Contact

**23. Declaration**

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 as applicable.

Place: .....

Date: .....

Signature of Candidate