PLICATION FORM FEE: Rs.25	CATION FORM FEE: RS.250/-						
F	For Office Use Only						
Inward No. :	CISST. No. :	Sr. No.					
Date ://201							
Section : CISST	Date ://201						
SARDAR PATEL UNIVERSITY VALLABH VIDYANAGAR-388120 (Dist. ANAND - GUJARAT)							
APPLICATIO	N FORM FOR THE POST	OF					

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1	Assistant Professor in _											
		for the CISST	Program	me								
The I	Newspaper in which you r	ead the Advertise	ment									٦
-	Advertisement No	_ Dated :/	/2013				3.	Afi 5 c.m	fix th X3.		m.	
Dem	and Draft No	_ Date :/_	/ <u>2013</u>	Rs2	250			est F y on		_	•	
Nam	e of Bank		_ Branch_					-	by			
Paya	ble at Branch		_ City _				,	Self .	Alles	stec	l	
IMPC	DRTANT: Before filling in the	e form please read t	he form, Ir	nstructio	ns and	d Qua	lifica	ation	s ca	aref	ully	' -
INST	RUCTIONS TO APPLICAN	ITS :										
(i) (ii) (iii) (iv) (v) (vi) (vii) (viii)	The candidate should subra separate enclosures with e Vidyanagar on or before to Candidates are advised to essential qualifications laid Separate application is required Canvassing of any sort will No correspondence & Phose selection and appointment Those who are already in channel and applications not the space Provided in any of Sardar Patel University residence.	ach copy to reach he last date. satisfy themselved down in the adversired for each post, disqualify a candicate inquiry will be eetc. n employment shoot sent through procolumn is found insuf	the Regist s before a tisement. otherwise late. ntertained ould forwa per chann ficient, Info	pplying, the appl in responder and their el are lia rmation b	that that that that that that the content of the co	ratel Inthew particular interests of the replication of the replied of the replie	Jniv poss will tise ons ejecton a	ess be mer thro ted. sepa	atle atle reject at, in ough	Val east ctec terv pr	lab , th d. viev	w, er
(• 111)	any application & right to al											
(ix)	If the any column is not a "Not Applicable" OR "N		andidate d	concern	ed in	that c	olur	mn p	olea	se	wri	te
(x) 	Incomplete Application Sha	all not be Consider	ed & Appl	icants n	nay no	ot be (calle	d fo	r Int	terv	∕iev 	٧.
1. (In	Block letters) Name in full:	Mr./Mrs./Ms./Dr.										
F	ather's/Husband's Name			$\Box\Box$	П	П	П		П			٦
Sur	name IIIIIIII		Mother's	Name			Ш				j	

2. (i)Please Tick (✓)appropriate.Please enclose Caste Certificate of appropriate authority,if applicable

S.C. S.T. Baxi Punch / SEBC General Phy. Handi Ex-Serviceman

(Attach a certificate from the competent	authority with Cast	e validity certific	ate for S.C./S.T./					
Socially Backward Class and Non-Creamy-l	ayer Certificate.) (A) Caste Certifica	ate No. :					
(B) Issue Date: (C) Nar	me of Issuing Autho	rity						
(ii) Birth Place Tal	Dist	Stat	e					
(iii) Native Place Tal	Dist	State _						
(iv) Race & Religion (v) N	ationality	(vi) Mother	tongue					
(v) Blood Group (viii)	Height	cms (ix) Weigh	t Kgs.					
(x) Personal Marks of Identification:								
3. Date of Birth DD MM YYYY Age:MonthsDays (A true copy of the Higher Secondary School Leaving Certificate in which the Birth Date is registered should be enclosed.)								
4. Please Tick (✓) appropriate : Married ☐ Unmarried ☐ Divorced ☐ Widow ☐								
(i) Approximately time required for joining (ii) Minimum Salary Acceptable : Rs 6. Full Address for correspondence (In Block)								
(i) Present	(ii) Perma	nent						
City PIN	City		_ PIN					
Tal Dist	Tal		Dist					
State	State _							
Phone No. STD code	Phone N	STD code						
Mobile No. E-Mail :-	Mobile N E-Mail :-							

7. Educational Qualifications: Examinations passed (Attested copies of all testimonials/ Certificates including Marks, Grade, Certificate should be attached):

	Examination Passed		ý	Name of the	Total Marks with Class,	th of ne on	npts ig ie ins	in ies d out
Sr. No.	Please Tick (√) appropriate in Graduations / Masters	Principal Subject	Subsidiary Subject	University or Examination Body	Grade, Exact percentage (%)	Year & Month of Passing the Examination	No. of attempts for passing each of the examinations	×
1	2	3	4	5	6	7	8	9
1	S.S.C							
2	H.S.C.							
3	F.Y.							
4	S.Y							
5	T.Y.							
6	Post Graduation I Sem							
	II Sem							
	III Sem							
	IV Sem							
7	M.Phil.							
8	Ph.D.				Date :			
	Title of Ph.D. Thesis							
9	GSLET							
10	NET							

(8) Details of Experience : (Post held in Private or Public employment giving details of Work) Teaching, Laboratory, Industry etc.) (Please attached separate sheet if necessary in following Performa.)

Full Name & Address of the Employer where Employed	Designation (Type of work)	Date of joining	Date of Leaving	Grant- in Aid/ SF/ Private	Full time/ Part time/ Adhoc	Basic Pay & Pay Scale or Fixed pay	Reason for leaving Previous Employment
1	2	3	4	5	6	7	8

(9) F	Present Position	on :												
	ıll Name & Ado the Employer Employed	where	Design	atior	1 I	Vork Oone		Gran in Aid SF/ Priva	d/ ′	Full t Part t Adh	ime/	or I &	asic Pay Pay Band A.G.P. R Fixed Pay	Date of pointmen
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` '	Area of Specia											•		
(11)	Research Exp						,	Τ.,						
	U.G.	Fron	n	To	0	Y	rs.	IVI	onth	S		ın	stitutions	
	P.G.													
	M. Phil.													
	Ph.D.													
(12)	Information (i) Date of	-					_			ch Ce	rtificat	e)		
	(ii) Name of	f the Univ	ersity gra	antin	g reco	gniti	on	:	_					

(13) Research Guidance:

Sr. No.		No. of Students working	No. of Students completed
1	Ph.D.		
2	M.Phil.		
3	Others		

(14) (i) Publications : (Please attach separate sheet in following format if necessary)

Sr. No.	Title of the Research Paper	State Level/ National level/ International Level	Name of the Journal in which Published with Vol. No., Page No.	Date of Publication	Name of Co-Authors if any
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

(ii) Articles: (Please attach separate sheet in following format if necessary)

Sr. No.	Title of the Article	State Level/ National level/ International Level	Name of the Journal/ Daily in which Published	Date of Publication	Name of Co-Authors if any
1					
2					
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12			
13			

(iii) Books: (Please attach separate sheet in following format if necessary)

Sr.	Title of the Book	Publisher	First	Date of	Name of Co-
No.	Title of the Book	Publisher	Addition	Publication	Authors if any
1					
2					
3					
4					
5					
6					
7					

(iv) Particulars of Paper/ Books under Preparation / Publication. (Please attach separate sheet in following format if necessary)

Sr. No.	Title of the Paper/Book	Name of Publisher	
1			
2			
3			
4			

(15) Awards for Best Research Paper/ Essay/ Article: (Please attach separate sheet in following format if necessary)

Sr. No.	Name of Award	State Level/ National level/ International Level	Awarding body	Date
1				
2				
3				
4				
5				

(16) Details of Seminar/Conference/Workshop/Winter School/Symposium/ Summer camp, Refresher Course, Orientation Programme etc. attended. (Please attach separate sheet in following format if necessary)

Sr.	Nature of the	State Level/	Overanizad by	Dura	ation	No. of
No.	Participation	National Level/ International Level	Organized by	From	То	Days
1						
2						
3						
4						
5						
6						
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14						

(17) Number of Research Papers/ Articles/ Books/ Seminar/ Conference/ Workshop/ Winter School/ Symposium/ Summer camp, attended.

		٦	otal P	ublicati	ons		Total	Numb	er atte	ended	
Sr. No.	Level	Research Papers	Articles	Books	Manuscript Ready for press	Seminar	Conference	Workshop	Winter School	Symposium	Summer camp
1	Local										
2	State/Regional Level										
3	National Level										
4	International Level										

(18) Name of Professional Associations in which you have held important positions or have been active member or/Fellowship of Academic Societies/Others (Please attach separate sheet in following format if necessary)

No.	Designation	Body/ Institutions	From	То	Duration
1					
2					
3					
4					
5					

(19) Any other relevant information (Special experience/merits) not included above (Participation in curricular and co-curricular activities, NCC/NSS/Sports/Cultural Activities etc. enclose all Certificates)

Sr. No.	Activities	Institution	From	То	No. of Days
1	N.C.C.				
2	N.S.S.				
3	Sports				
4	Cultural activities				

								•				
(20) L	angua	ges K	nown Tick (✓) appro	priate :							
		Sr. No.	Lang	juage		Read	V	Vrite	Spe	eak		
		1	English									
		2	Gujarati									
		3	Hindi									
		4										
		5										
(21) E)orcond	from	whom conio	s of tos	timonic	als are enclose	.d ·					
(21) F	Sr.	110111	Name	S OI IES		als are enclose	;u .		^	ddraaa		
	No.		IName		'	Occupation		Address				
	(i)											
	(ii)											
	(iii)											
(22) N	lame, a	addres	ss and Phone	e No. of	not mo	ore than two pe	ersor	ns to who	m refe	rence c	an be	made:
	No.		Name		Fu	ıll Address		Period for v Phone No. he/she has ki the candid		known to		
	1											
	2											
<u>No</u>		the con 2) Hav	candidate d ducting the i ve you ever b	uring the nterview neen ar	ne perio w will no rested/j	experience, ho od between th ot be taken into prosecuted/ke g against you	e las o cor pt in	it date of nsideration detention	f applic on. n/convid	ation a	nd the	e date of
			•		•	uestion is "Yes						
	(3	any	other educa	ational	instituti	d from any ex on or whether ional institutior	any	case is		ng agair		ou in any

If the answer to the above question is "Yes" give	e details
(4) Has any disciplinary action been taken against yo you have served? Yes No	
" If Yes" give details	
I, hereby declare that the information furnished a best of my knowledge and belief and also that I have held any information regarding my past service and found to be false or incorrect or any thing is found to disqualified for selection or if appointed, will be lia notice or compensation. Place:	e not concealed any fact or with d record. If any information is have been concealed, I will be
Date ://201	Signature of the Applicant
* It is essential for the applicant to forward the ap	oplication through his/her present

* Forwarded with compliments to the : Registrar, Sardar Patel University, Vallabh Vidyanagar-388120

employer. Application forwarded directly are liable to be rejected.

FOR USE OF APPLICANTS IN EMPLOYMENT

I declare that the above statement made by the applicant are correct to the best of my knowledge and belief. I have "No Objection" to his/her applied and selected for the concerned post in your University. He/She will be relieved.

Place	:		Signature of Authority	
Date :		_/201	Designation	
			Office Stamp	
	Note:	enclosu	s of Marksheet / Certificates should be Self Ares attached by the applicant should be arranging order which enclose: Please tick (</td <td>•</td>	•

No.	Details Enclosed with Application Form	(√)	Encl. at Page No.
1.	First Copy of Application Form with Photograph.		
1.	Address Slip. (With first Copy)		
2.	Caste Certificate (If necessary)		
3.	Higher Secondary School Leaving Certificate.		
4.	S.S.C. / H.S.C. all Marksheet.		
5.	F.Y.,S.Y. & T.Y. all Marksheet & Degree Certificate.		
6.	Post Graduate's Degree -Previous & Final Year all Marksheet & Degree Certificate.		
7.	M.Phil. Marksheet & Notification.		
8.	Ph.D. Notification & Degree Certificate.		
9.	GSLET Passing Certificate.		
10.	NET Passing Certificate.		
11.	B.Ed./ M.Ed.		
12.	Other Qualifications Certificates		
13.	Testimonials / Experience Certificates.		
14.	Publications/ Research Papers/ Articles.		
15.	Workshops/ Seminars/Conferences/Symposium attended Certificates		
16.	If apply For Professor Ten (10) Papers/ Books/ Publication & For Associate Professor Five (05) Research Papers/Books Compulsory to attach.		
17.	11 Sets of Application forms with copy of Resume/ Testimonial /Experience Certificate		

Please fill ALL the following ADDRESS SLIPS with BALLPEN - DO NOT WRITE "AS ABOVE". Please write Full Name & Postal Address (With Pin Code) Legibly for further communication.

BY SPEED POST	BY SPEED POST
To,	То,
Name	Name
Address	Address
BY SPEED POST	BY SPEED POST
To,	То,
Name	Name
Address	Address
BY SPEED POST	BY SPEED POST
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