

PONDICHERRY UNIVERSITY

A Central University

Dr. B.R. Ambedkar Administrative Building R. Venkataraman Nagar, Kalapet, Puducherry – 605 014

(www.pondiuni.edu.in)

APPLICATION FOR Coordinator cum Teaching Faculty

1)Advertisement No: RC/2014/22

Advt. Date: 19.08.2014 Note: Prospective candidates are advised to study the Instructions carefully and then fill up the application in all respects. No column should be left blank. Incomplete application will be rejected. Attach additional sheets, if required. However, information given must be precise to the point.

2) Name of applicant (in full capitals)	:		-
3) Post Applied for (Use separate application fo			(Affix recent passport size photo
4) Department	:		duly signed by you)
5) Father's name	:		-
6) Mother's name	:		
7) Age (As on the last date of receipt of application) 8) Date of Birth	Day Mon		_
9) Nationality	:		-
10) Religion	:		-
11) Gender	: Male F	emale	
12) Marital Status	:		
a) Spouse Name, if applicab 13) Address	le :		
For Commun	nication	Perr	nanent
State:	Pin:	State:	Pin
Phone: R)	Email :_		
Phone: O)	Mobile: _		

	14) Catego (Put _l / (*Att	mar	,	* 🗏	OBC* Gen he competen		_	Ex. Service by prescribed b		en ne Government of In	ndia)
	Whether Persons with Disability Yes* No (Put ✓ mark) *If yes VH OH (Put ✓ mark) Disability(%): (*Attach a certificate from the competent authority as prescribed under government rules)										
	16) Educat	tiona	al Qualific	atic	` `			ards) (Atta	ch_		
Exa	amination		Board		Month & of pas			Marks Obtained	1	Overall percentage	Class/ Division
	C/Matric										
	quivalent C/+2(HSC)										
	quivalent										
Dipl any	loma, if										
	17) Educat	tions	al Qualific	atio	on (UG D	egr	ъе О.	nwards) (A	ttad	ch Proof including	g statement of marks)
Sl.	Degre		· ·	abje	,	<u>cgr</u>	U	niversity/	luat	Percentage	Year of
No				J			1	nstitute		of marks	Passing
1.											
2.											
3.											
4.											
5.											
6.											
7.											
	18) Ph.D Particulars (Attach Proof)										
Date	e of	Wh	ether	Di	iscipline/			iversity		ate of Thesis	Year of
Reg	istration		lltime or rt time	De	epartmer	ıt		which ıdied	S	ubmission	passing/Date of Viva-Voce
	Title of Thesis										

_	netner quanned UGC-NE yes, give details:	T/SLET(All India	Level) SLET SLET (Please tick the correct box)
Su	ıbject:	Regn. No:	Year of passing
a)	Academic Distinction (eg., a	any prize, medal, certi	ficate of merit, if any)
-			

20. *Teaching Experience (starting with the most recent) (Attach Proof)

	20. *Teaching Experience (starting with the most recent) (Attach Proof)								
	Institute/	Post Held	Dura	ation		ength o		Whether UG/PG	Permanent/ Temporary/
No	University/	and Pay	П	/D	Y	M	D	Od/1 d	Contract/
	Omversityi	Scale	From	То		141	ט		Consolidated
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				Total					
				13001					

Note: *Experience as Visiting/Guest Faculty paid on hourly/session basis not to be included, * Research /Teaching experience obtained during the study of M.Phil/Ph.D not to be included.

21 Research/Industry Experience if any, (Other than as a Faculty & Ph.D Scholar); Example as a Scientist/PDF/Research Associate/Etc.,) (Attach Proof)

	Institute/	Post Held	Dura	tion	Leng	th of se	rvice	Permanent/
No	University/	and Pay Scale	From	То	Y	M	D	Temporary/ Contract/ Consolidated
1.								
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4.								
	Total							

22. Administrative Experience(Attach Proof)

No	Post Held and Pay Scale	Organization	Nature of Responsibility	D Y	uratio M	D D	Whether overlapping with Teaching/Resear ch Experience,
							if any
1							
2							
3							
4							
5							
	Total						

23) Present employment (Attac	
Name of the Organization	:
Post Held	:
Pay Band	:
Academic Grade Pay	:
Date of Appointment	:
Whether Permanent / Temporary/ or on Probation	:
Whether State / Central Government / PSU /Private	÷

24. Research and Academic Contributions

Sl.	Dublications only	Pı	ublished (in Nos))
No	Publications only	International	National	Others
i	Refereed Journals			
ii	Non Refereed Journals			
iii	Conference proceedings as full papers			
iv	Text or Reference Books			
V	Subject Books			
vi	Chapters in edited Books			_
vii	Other publications, if any			

	Chapters in curted books			
	Other publications, if any			
	5. No. of Papers Presented in Conference/Sem (Other than published)6. No of Research Projects undertaken (Specify Major or Minor Project)	inar: : Completed	Ongoing	-
2	7. No. of Ph.D. guidance :Awarded :	Submitted:		
2	8. No. of M.Phil guidance : Awarded:			
2	9. No of Training Courses attended (more than (International /National)	a week):		
3	0. No of Invited Talks/Lectures (International /National)	:		

31) Travel or Study abroad

Country visited	Period		Purpose of visit
	From	То	

32) Knowledge in languages

	in languages		
Languages	Speak, Read and Write	Read and Write	Ability to speak fluency

33) Character & Antecedents Report

Subject	Remarks
Have you ever been subject to any disciplinary action, as a student and/or as an employee. If so give full details	
Have you ever been dismissed/suspended from service/employment, if so please give full details	
Were you involved in any criminal case? If yes, give full details	
Is any criminal case pending against you in the court? If yes, give full details	

34. Names and Addresses of minimum three Referees (including e-mail/phone) (All of them should be familiar with your Academic/Professional work)

Name & Address	Name & Address	
Phone:	Phone:	
Email:	Email:	
Eman	Billali	
Name & Address	Name & Address	

Phone:_____

Email:____

35	List	of	enc	losures:
oo.	LIBU	OI	CIIC	lobul cb.

Phone:

1.

Email:__

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- 10.

DECLARATION

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all entries in this form, as well as, in attached sheets are true to the best of my knowledge and belief. At any stage if any of the information furnished by me is found to be false or incorrect, suitable action may be taken against me. If selected, I promise to abide by the rules and regulations of the Pondicherry University.

Date :	Signature
Endorsement of the present employer (if already employed)	Signature of the Employer
Office seal with date:	Name: Designation: