

APPLICATION FORM FOR THE POST OF ASSISTANT PROFESSOR In the Department: ______

1. Personal Details	
Name (in Block Letters):	Photo
• Father's/Mother's Name:	
• Date of Birth (DD/MM/YYYY):	
Gender: [] Male [] Female [] Other	
• Category: [] General [] SC [] ST [] OBC [] EWS [] Others (Specify)	
Nationality:	

•	Marital Status: [] Single [] Married
•	Permanent Address:

•	Correspondence Address (if different):	
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•	Mobile No.:	
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• Email ID: _____

2. Educational Qualifications

(Attach self-attested copies of mark sheets and certificates)

Examination	Board/University	Year of Passing	Percentage/CGPA	Division
HSLC				
HSSLC				
Bachelor's Degree				
Master's Degree				
Ph.D.				
NET/SLET				
Others (if any)				

3. Teaching/Research Experience

(Attach separate sheets if required)

Name of Institution	Designation	Period (From - To)	Nature of Work

4. Publications (If Any) (Attach separate sheets if required)

Title of Paper/Book	Journal/Publisher	Year	ISSN/ISBN

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•	Proficiency in Computer Applications: [] Yes [] No Fluency in English: [] Yes [] No Participation in Seminars/Workshops/Conferences (Attach details): Extracurricular Activities/Awards:				
6. Dec	elaration				
I,	, hereby declare that all the information provided in				
	oplication is true to the best of my knowledge and belief. If any information is found to be				
-	or incorrect, my application may be rejected, and I shall be liable for any consequences.				
Place:	(Signature of the Applicant)				
	actions:				
1.	Attach self-attested copies of all relevant documents (if selected).				
	2. Incomplete applications will be summarily rejected.				
3.	The duly filled application should be submitted to the Principal, Sijou College,				
	Mushalpur, before the last date.				
For O	office Use Only Application Received on: Verified by:				
	Remarks:				