

FOR OFFICE USE

DATE OF RECEIPT:



ST. DOMINIC'S COLLEGE KANJIRAPALLY

Parathode – 686512, Kottayam District, Kerala

Affiliated to Mahatma Gandhi University, Re-accredited with A Grade by NAAC in 2017

APPLICATION FOR THE POST OF ASSISTANT PROFESSOR

- (1) SUBJECT :
- (2) NAME OF THE CANDIDATE :
(IN BLOCK LETTERS)
- (3) FATHER'S NAME :
- (4) MOTHER'S NAME :
- (5) DATE OF BIRTH :
- (6) ADDRESS FOR COMMUNICATION :
- (7) MOBILE :
- (8) E-MAIL ID :
- (9) PERMANENT HOME ADDRESS :
- (10) NATIONALITY :
- (11) CATEGORY : GENERAL / SC / ST / PwBD
[PLEASE STRIKE OFF WHICHEVER IS NOT APPLICABLE]
- (12) GENDER : MALE / FEMALE / TRANSGENDER
- (13) MARITAL STATUS : SINGLE / MARRIED
- (14) RELIGION AND CASTE :
- IF SYRO-MALABAR CATHOLIC,
NAME OF THE PARISH AND DIOCESE :
(Attach certificate from the parish priest)

Affix latest
Photograph

(15) EDUCATIONAL QUALIFICATION (PLEASE ATTACH SELF ATTESTED COPIES OF CERTIFICATES)

SL. No.	EXAMINATION PASSED	SUBJECT, YEAR & MONTH OF PASSING	UNIVERSITY / BOARD	MARKS OBTAINED / TOTAL MARKS	DIVISION / %	CGPA (IF GRADING IS APPLICABLE)	REMARKS (For office use)
(1)	MATRIC / EQUIVALENT						
(2)	PLUS TWO						
(3)	B.A. / B.Sc.						
(4)	M.A. / M.Sc.						
(5)	M.Phil. / M.Tech.						
(7)	Ph.D.						
(8)	NET						
(9)	ANY OTHER QUALIFICATION						

(16) CHRONOLOGICAL LIST OF THE TEACHING EXPERIENCE (INCLUDING THE CURRENT POSITION)

Experience shall be counted only after acquiring minimum qualifications stipulated by the UGC for the post of Assistant Professor.

DESIGNATION Guest / Contract/ Temporary	NAME OF THE INSTITUTION	PERIOD OF EXPERIENCE			REASONS FOR LEAVING	REMARKS (For office use)
		FROM (DATE OF JOINING)	TO (DATE OF LEAVING)	NO. OF YEARS / MONTHS (AS ON THE DATE OF ADVERTISEMENT)		

Separate sheet can be attached if necessary

TOTAL TEACHING EXPERIENCE AT GRADUATE / POST GRADUATE LEVEL:

(17) Details of proficiency in ICT enabled teaching practices as evident from e-content developed and published in UGC INFONET / EMMRC / CEC and innovative teaching practices as evident from new technologies/ programmes like MOOC programmes uploaded in SWAYAM platform of UGC/ participation of LMS / CMS for Universities and other higher education institutions / virtual laboratory – remote laboratory development etc.

Separate sheet can be attached if necessary

(18) PUBLISHED PAPERS IN JOURNALS

SL. No.	TITLE	JOURNAL, VOLUME & PAGE NOS.	Web of Science, Scopus indexed/ UGC CARE Listed	SPECIFY IMPACT FACTOR, IF ANY	WHETHER YOU ARE FIRST/ CORRESPONDING AUTHOR	REMARKS (For office use)
1						
2						
3						
4						
5						

Separate sheet can be attached if necessary

(19) PUBLISHED PAPERS IN CONFERENCE PROCEEDINGS

SL. No.	TITLE WITH PAGE No.	NAME OF SEMINAR / CONFERENCE	ISSN No.	ORGANIZING DEPARTMENT & FUNDING AGENCY	WHETHER YOU ARE FIRST/ CORRESPONDING AUTHOR	REMARKS (For office use)
1						
2						
3						
4						
5						

Separate sheet can be attached if necessary

(20) KEYNOTE ADDRESS / PLENARY / INVITED TALK IN INTERNATIONAL CONFERENCES OR INSTITUTES OF NATIONAL / INTERNATIONAL REPUTATION

SL. No.	ORGANISING INSTITUTE	TITLE OF THE TALK	NAME OF THE CONFERENCE/ SEMINAR	REMARKS (For office use)
1				
2				
3				
4				
5				

Separate sheet can be attached if necessary

(21) BOOKS, CHAPTERS IN BOOKS OTHER THAN REFEREED JOURNAL ARTICLES

SL. No.	TITLE	BOOK / CHAPTER	ISSN/ISBN NO. AND PUBLISHER	WHETHER EDITED, if Chapter in a Book	NO. OF AUTHORS	REMARKS (For office use)
1						
2						
3						

Separate sheet can be attached if necessary

(22) POST DOCTORAL EXPERIENCE

NAME OF THE DEPARTMENT / INSTITUTION	PERIOD OF EXPERIENCE			REMARKS (For office use)
	FROM (DATE OF JOINING)	TO (DATE OF LEAVING)	NO. OF YEARS / MONTHS (AS ON THE DATE OF ADVERTISEMENT)	

Separate sheet can be attached if necessary

(23) DETAILS OF INTERNATIONAL PATENTS / POST DOCTORAL FELLOWSHIPS:

(24) INTERNATIONAL / NATIONAL LEVEL AWARDS GIVEN BY INTERNATIONAL ORGANIZATION / GOVT OF INDIA, CENTRAL GOVT RECOGNIZED NATIONAL LEVEL BODIES AND STATE LEVEL (AWARDS GIVEN BY STATE GOVT.)

SL. No.	NAME OF THE AWARD AND YEAR	AWARD GIVEN BY	INTERNATIONAL / STATE	REMARKS (For office use)

(25) EXTRA-CURRICULAR ACTIVITIES

(26) ANY OTHER INFORMATION / QUALIFICATION RELEVANT TO THE POST APPLIED FOR (PLEASE ATTACH SEPARATE SHEET(S) IF REQUIRED)

(27) REFERENCES

NAME, ADDRESS, PHONE NUMBER AND E-MAIL ID OF THE REFREES	REFEREE 1	REFEREE 2

DECLARATION

1. I, _____ Son / Daughter of _____ do hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge, belief and understanding. In the event of any information being found false or incorrect or ineligibility being detected before or after the Selection, the College authority or other competent authority may cancel my candidature / appointment.

2. I further declare that all the research publications / books / conference certificates submitted by me along with my application are genuine and published in the same Journal / Books which are claimed as such. In case any of the publications / articles / certificates so submitted by me is found to be false, I shall be responsible for the same and I understand my selection will stand cancelled and I shall be bound to refund all the monetary benefit drawn by me along with the expenses incurred by the College for my selection.

PLACE:

SIGNATURE OF THE APPLICANT

DATE:

ENDORSEMENT BY THE PRESENT EMPLOYER (IF APPLICABLE)

(The endorsement below is to be signed by the Institution / Employer of the Organisation / Institution in the case of an in-service candidate), whether in permanent).

The applicant Dr. /Mr. /Mrs. /Ms. _____, who has submitted this application for the post of Assistant Professor at St. Dominic's College, Kanjirapally is working in this organization namely.....at the post of..... in a temporary / permanent capacity with effect from.....

It is further certified that no disciplinary / vigilance case has ever been initiated or is pending against the said applicant. We have no objection for his / her application being considered for appointment by the St. Dominic's College, Kanjirapally.

(SIGNATURE OF THE COMPETENT OFFICER WITH SEAL)

PLACE:

NAME: _____

DATE:

DESIGNATION: _____

APPLICANT MUST ENCLOSE A BANK DRAFT OF RS. 1000/- (APPLICATION FEE) DRAWN IN FAVOUR THE MANAGER, ST. DOMINIC'S COLLEGE PAYABLE AT KANJIRAPALLY OR REMIT THE SAME AT THE COLLEGE OFFICE.

DETAILS OF PAYMENT OF APPLICATION FEE	(i) BANK DRAFT NO. AND DATE : (ii) RECEIPT NO. AND DATE : In case of payment at the college office (iii) EARLIER APPLICANT (2018 NOTIFICATION) : YES / NO
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Send Completed Application Form to: **THE MANAGER, ST. DOMINIC'S COLLEGE, KANJIRAPALLY, PARATHODE-686512, KOTTAYAM DISTRICT, KERALA**

N.B. APPLICATION WITHOUT SELF ATTESTED TESTIMONIALS SHALL NOT BE ENTERTAINED