



-1-

SRINIVAS UNIVERSITY

Affix
Passport Size
Photograph

Educating the Next Generation

Main Campus, Srinivas Nagar, Mukka, Mangalore – 574 146.
City Campus, Pandeshwar, Mangalore – 575 001, Karnataka State, India.
 (Private University established by Karnataka State Govt. Act 42 of 2013, Recognized by UGC, New Delhi,
 Member of Association of Indian Universities, New Delhi)
 Administrative Office Phone : 0824-2425966, Pandeshwar City Campus, Phone : 0824-2441022
 E-mail – info@srinivasuniversity.edu.in, Web : www.srinivasuniversity.ac.in

Application for the Post of Associate/Assistant Professor

ADVERTISEMENT No. Dated:
 ///

POST APPLIED FOR:

Department/Subject:

Specialization:

1. (i) Name
(in BLOCK LETTERS) :

2. Date

Day	Month	Year

 of Birth:
 Age (as on date) :

3. Place of Birth 4. District

5. Nationality 6. Gender: Male / Female

7. Religion 8. Caste

9. Address of Communication : Permanent Address

Pin Code:	Mobile No.	-2-	Pin Code:	Mobile No.
E-mail ID:		E-mail ID:		

10. Academic qualifications:

(Examinations passed from matriculation / Higher Secondary onwards) (Start with higher degree)

(Xerox copies must be enclosed with self attested)

Examination	Name of the Course	Subject	Year of Passing	% of Marks Obtained	Division	School/College Studied	Name of the Board / University

11. Academic distinctions (e.g. any Prize, Medal, Award etc.):

12. Whether qualified in NET/SLET/SET: Yes / No. if yes, Year of Passing:

13. Research Qualifications:-

Degree	Title of the Thesis	Subject / Discipline	Date & Year of Award	University
M. Phil				
Ph.D.				
Specify Area of Research				

14. Post-Doctoral Experience if any :

Sl. No.	Positions Held	Awarding Organization	Emoluments per month	Title of the Project	From	To

15. Publications (Attach separate sheet list) qualifications with file, coauthors, name of the publisher, ISSN, impact factor etc.

Description	No. of Publications	Citation Index
Book		
Book Chapters		
Research Papers		
Review Articles		
Case Studies		
Monographs		
Conference Publications		
Others		

16. Research Projects if any executed :-

Title of the Project	Duration	Funding Agency	Total Grant Sanctioned

17. Particulars of the Research Guidance :-

a. Number of scholars awarded / working

Status	M. Phil	Ph. D.
Awarded		
Working		

b. Awards, Rewards, Fellowships,

Patents if any:

(i)

(ii)

(iii)

			-3-				
--	--	--	-----	--	--	--	--

21. Administrative Experience, if any : (*)

Name of the Institution/ Organisation	Designation	Nature of post Temporary/ Permanent	Nature of assignment	Period (give dates)	Length of Experience	
					Years	Months

22. Name and address of the present employer :

23. Has the consent of the employer been obtained to submit this application in case the applicant is employed in Govt. at present. (The applicant should enclose a '**NO OBJECTION CERTIFICATE**' from the present employer) :

24. Name and address of three persons who are not related to the applicant but who know the applicant well and to whom references may be made:

1.

2.

3.

25. Any additional information which the candidate wishes to give in support of his / her application:

DECLARATION

I hereby declare that the statements made in this application are true to the best of my knowledge and belief. If at any stage it is found that the particulars furnished by me are false my candidature / application / appointment, if any may be cancelled.

Date :

Signature of the Applicant