

PART-A

(Application Form for Applying Teaching Position)

	<p>BIRANGANA SATI SADHANI RAJYIK VISHWAVIDYALAYA GOLAGHAT – 785 621 :: ASSAM E-mail : registrar@bssrv.ac.in</p> <p>APPLICATION PRO-FORMA FOR TEACHING POSITIONS (Please read carefully the general conditions / instructions given below before filling in the form)</p>	<p><i>Applicants must paste here a recent passport size photograph</i></p>
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<p>To be returned to: The Registrar Birangana Sati Sadhani Rajyik Vishwavidyalaya, Golaghat, Golaghat – 785 621, Assam.</p>	<p>Details of application fee :</p> <p>1. Name of the bank:</p> <p>2. Demand Draft/Bankers' Cheque No.</p> <p> Date</p> <p>3. Amount: Rs. 2500/- (Rupees Two Thousand Five Hundred) only</p>
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1.	(a) Advertisement No. & Date:											
	(b) Name of the Post applied for :											
	(c) Field of specialization opted for out of those specified in the advertisement (if applicable):											
2.	Name of the Applicant: (in CAPITAL letters)											
3.	Father's / Spouse's Name:											
4.	(a) Marital Status: <input type="text"/>	(b) Gender: <input type="text"/>										
		(c) Blood Group <input type="text"/>										
5.	(a) Correspondence address (in CAPITAL letters):											
	(b) Permanent address (in CAPITAL letters):											
	(c)Phone No.	Land line (with STD)										
		Mobile										
	(d) e-mail:											
6.	Date of Birth (as per Christian era):	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>										
		Day Month Year										
7.	Age on the last date of receipt of application as stated in the advertisement:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>										
		Years Month(s) Day(s)										
8.	Are you a citizen of India? Write YES or NO											
9.	(a) Do you belong to Scheduled Caste / Scheduled Tribe / Other Backward Classes / Persons with Disability / Ex-serviceman?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">SC</td> <td style="width: 15%;">ST</td> <td style="width: 15%;">OBC</td> <td style="width: 15%;">PWD</td> <td style="width: 15%;">Ex-Serviceman</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	SC	ST	OBC	PWD	Ex-Serviceman					
SC	ST	OBC	PWD	Ex-Serviceman								
	Write SC/ST/OBC/PWD/Ex-serviceman as the case may be:											
	(b) If none, write NONE in the box:											
	(c) If you belong to PWD (Persons with Disability), then state the nature of disability as OH (Orthopedically Handicapped), VH (Visually Handicapped) or HH (Hearing handicapped):	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">OH</td> <td style="width: 33%;">VH</td> <td style="width: 33%;">HH</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </table>	OH	VH	HH							
OH	VH	HH										
10.	Religion:											
11.	If appointed, what notice / how much time would you require for joining the post?											

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case any of the information is found to be incorrect at any stage.

Date: _____ **Signature of the applicant**
Place: _____ **Name in full:**

(Applicants must also fill in the PART-B and PART-C of the Application Form)

PART-B

1. Give particulars of all examinations passed, all degrees and technical qualifications obtained at a University or higher technical institutions of learning, commencing with High School Leaving (10th standard) / Matriculation examination. Please attach photocopies of certificates and marksheets.

Sl. No.	School / College / Institute	Name of the Board / University / Institution	Degree / Diploma passed / obtained	Distinction / Class / Division	Subject (mention field of specialisation / major, if any)	% of Marks obtained	Date of passing

2. Particulars of GATE, UGC/CSIR NET/SET/Ph.D. (under new regulations of UGC) clearance.

Name of the Test	Year	Roll No.	Subject

3. Details of employment, if any (give here particulars of your past and present employment in chronological order starting with present employment):

Sl. No.	Organization / Institution	Position held	Nature of duties / work	Date of joining	Date of leaving	Length of service	Pay scale	Additional remarks about experience, if any*

* Specify if the position is (i) Pre-Ph.D. (ii) Post-Ph.D. (iii) Concurrently in Ph.D.

PART-C

RESEARCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS

(A) (i) Published Papers in Refereed Journals as notified by UGC

Sl. No.	Title with Page nos.	Journal	ISSN/ ISBN No.	Impact factor	Whether Peer reviewed. Impact factor, if any	No. of co-authors	Whether first or corresponding author	Research Score	Sl. No. of proof of enclosure

(A) (ii) Published Papers in Other Reputed Journals as notified by UGC

Sl. No.	Title with Page nos.	Journal	ISSN/ ISBN No.	Impact factor	Whether Peer reviewed. Impact factor, if any	No. of co-authors	Whether first or corresponding author	Research Score	Sl. No. of proof of enclosure

(B) Publications other than Journal articles (books, chapters in books etc.)

(i) Text/Reference, Books published by International Publishers, with ISBN/ISSN number

Sl. No.	Title with Page nos.	Book Title, editor & publisher	ISSN/ ISBN No.	Whether Peer reviewed.	No. of co-authors	Whether first or corresponding author	Research Score	Sl. No. of proof of enclosure

(B) (ii) Subject Books, published by National level publishers, with ISBN/ISSN number or State / Central Govt. Publications.

Sl. No.	Title with Page nos.	Details of Conference Publication	ISSN/ ISBN No.	No. of co-authors	Whether you are the main author	Research Score	Sl. No. of proof of enclosure

(B) (iii) Subject Books, published by other local publishers, with ISBN/ISSN number

Sl. No.	Title with Page nos.	Type of Book & Authorship	Publisher & ISSN/ ISBN No.	Whether Peer reviewed.	No. of co-authors	Whether you are the main author	Research Score	Sl. No. of proof of enclosure

(B) (iv) Chapters in Books, published by National and International level publishers, with ISBN/ISSN number

Sl. No.	Title with Page nos.	Type of Book & Authorship	Publisher & ISSN/ ISBN No.	Whether Peer reviewed.	No. of co-authors	Whether you are the main author	Research Score	Sl. No. of proof of enclosure

(C) Ongoing and Completed Research Projects and Consultancies

(C) (i & ii) Ongoing Projects/Consultancies

Sl. No.	Title	Agency	Period	Grant/ Amount Mobilized (Rs lakh)	Research Score	Sl. No. of proof of enclosure

(C) (iii) Project Outcome/Outputs

Sl. No.	Whether policy document/ patent/ technology transfer/ product/process	Title	Agency	Whether International/ National/Central Government/ State Govt./Local bodies	Research Score	Sl. No. of proof of enclosure

(D) Research Guidance

Sl. No.	Number Enrolled	Thesis Submitted	Degree awarded	Research Score	Sl. No. of proof of enclosure
P.G/M. Phil. or equivalent					
Ph. D. or equivalent					

(E) (i) Fellowships/Awards from academic bodies/associations

Sl. No.	Name of the Award	Academic body/Association	Whether International/National/State/ University level	Research Score	Sl. No. of proof of enclosure

(E) (ii) Invited lectures /papers

Sl. No.	Title of Lecture/ Academic Session	Title of Conference/ Seminar etc.	Organized by	Whether International/National/State/ University level	Research Score	Sl. No. of proof of enclosure

(F) Development of e-learning delivery process/material

Sl. No.	Title of Module	Recognized by/Submitted at/Delivered at	Research Score	Sl. No. of proof of enclosure

Details of enclosures sent with this application form:

i)	ii)
iii)	iv)
v)	vi)
vii)	viii)
ix)	x)
xi)	xii)
xiii)	xiv)

Declaration:

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case any of the information is found to be incorrect at any stage.

Date: _____ **Signature of the applicant**

Place: _____ **Name in full:**

Forwarding note of the Employer:

Certified that.....has been an employee of (name of the organization) since (date) and at present working as and information given by the employee in Part-A, Part-B and Part-C are correct to the best of my knowledge.

This organization has no objection to his / her applying for the position of at Birangana Sati Sadhani Rajyik Vishwavidyalaya.

Further, it is certified that no disciplinary/ vigilance case has ever been held or contemplated or is pending against the said applicant.

Memo No. _____ **Signature:** _____

Date: _____ **Designation:** _____

Place: _____ **Name of the organization** _____