कुमाऊँ विश्वविद्यालय, नैनीताल KUMAUN UNIVERSITY, NAINITAL (Accredited "A" Grade by NAAC)



Tel: 05942-235563, Fax: 05942-232262 Website <u>www.kunainital.ac.in</u>

Advertisement no:
Post Serial No. :
Post Applied For:
Department :
Demand Draft no.
and Date :
Name of the bank:

Note

- 1: Please go through instructions given in the website www.kunainital.ac.in carefully before filling-up the Application Form & Self Assessment API Score Card
- 2: Candidates are advised that all enclosures i.e., books, publications, manuscripts etc. are to be sent with the application form and not sent separately. However, if they are sent subsequent to the submission of the application form, candidate must enclose forwarding letter giving his full name and address and name of the post applied.

Recent passport size photograph of the candidate (self attested)

	Full Name of the Candidate							
	(In Block Letter)							
1.	Father's / Spouse Name:							
2.	Marital Status:							
3.	Permanent Address:							
4.	Present Address in full:							
	(with PIN code)							
5.	Contact No.:	Tel. No (with STD code)						
		Mobile						
		E-mail ID						
6.	Date of Birth:							
	(as per 10 th Certificate or equivalent)							
7.	Sex (Male/ Female):							
8.	State of Domicile:							
9.	Nationality:							
10.	a) Candidate's Mother Tongue:							
	b) Other Language Known:							
11.	Category: SC/ST/OBC/PWD/EWC/General							
	(in case of PWD category, please indicate PH-OH	H/PH-HH/PH-VH) (Please attach attested copy of Certificate)						
12.	2. Religion: Hindu/Muslim/Sikh/Christian/Buddhist/Zoroastrian (Parsis)/Jain/Neo/Others							

13. W	/hether qualified	d UGC/C	SIR NET/SLET	/SET	Yes			No [
((If yes, indic certificate) cademic Qualifi		e year, a	nd atta	ach a se	elf attested	copy of	NET/ S	LET / SET
	tion or Degree Passed		ne of the /University	Sub	jects	Total Marks/ Maximum marks	% of Marks	Division	Year of Passing
High Scho	ool/HSC								
Intermed Secondar	iate/Higher Y								
Under Gr	aduate								
Post Grad	luate								
M. Phil.									
UGC/CSIF									
Ph. D	702.								
Others									
*Title of t	the Ph. D. /D.Ph the D Sc /D.Lit the s of Employmer	hesis:		onologica	ıl order sta	rting with the	most recent	:) (Attach se	eparate sheet
S. No.	Name of		Post held	-	Period of Er	mployment	, , , , , , , , , , , , , , , , , , ,		Nature of
	Employer/Stat		Designati	on					duties
	(Govt./Qua Govt./Autono etc.)	ısi			From	То			
16.a. List of Research Publications:									
(I S. No	nclusive of pape		hed in Journa Name of the			on Reuters	SI. no. of t	he T	itle of the

(Volume no. and Page

no.)

Impact Factor of

the Journal

Journal in the

list of UGC

Paper

*Please	attach self attested c	opies of the pul	blicatio	15.						
16.b. Lis	t of Books/Chapter in	Book:								
S. No.	Title of the Book	ISBN No.	Autho	or's Name	's Name Publish		If Chapte	er (mention page no.)		
					- Tune					
16.c. De	tails of the participat	ion in conferen	ce/Semi	inar/Works	hop/Trair	ning prog	gram			
S. No. Name of the title of event				Place or	Place organized		Date & Duration		Title of the paper	
	(Conference/works	• •	ining	а	it	of the event		if presented		
	pro	gram)								
17 a\ Ni	ame of the present er	malayar and are	iti	on /if omnl	o.cod).					
17. a) N	ame or the present er	npioyer and org	gamzau	on (II empi	byeu):					
			-							
b) P i	resent employment d	etails:	_							
	i) Post held:		_							
	ii) Date of appoint	tment:								
	iii) Whether perm	anent/								
Temporary or on probation:										
iv) Whether State/Central Govt.										
	/PSU/Private/	any other:								
18 Sum	mary of experience/p		_							
10. 54	Teaching Exp			From	1	То	Total experience		perience	
							Year	S	Months	
Under G	raduate									
Post Gra	iduate									
Total Te	aching Experience									
Participation in production of Educational TV										
	rm/Continuing Educat	tion / Specialist	Courses	5						
conduct										
Posser-I	Research Exp		nont for	_						
	h Experience other th	•	pent 101							
	obtaining M.Phil./Ph.D. Research Degree *Note: Candidates working/worked with University affiliated colleges/Private Institutes should submit their									

^{*}Note: Candidates working/worked with University affiliated colleges/Private Institutes should submit their experience certificate countersigned by the competent authority.

⁽a) Has there been any break in your academic career? If so, give details.

(b) Have you If so, give det	been punished										
(c) Have you If so, give det	been punished tails.										
dismissed?	(d) Have you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? If yes, give details in a separate sheet.										
(e) Do you ha		ending against you ir	n any cou	rt of law?							
19. Honours 20. Have you	19. Honours and awards, membership of professional societies.										
	y visited	Duration of visit		Purpose of visit	Field of specialisation, if any						
21 Particular	r of references										
21. Particular of references. Sl. No. Name			0	ccupation and address	Contact number and email id						
1	1										
2											
<u>Declaration</u>											
The information furnished above are correct and if at any time it is found that I have furnished false/incorrect information, my candidature/appointment can be terminated without giving any prior notice.											
			Signature of the applicant (in full) Name in full(In BLOCK LETTER)								