



SHRI MATA VAISHNO DEVI UNIVERSITY

Kakryal, Katra-182320(J&K)
EPABX No.: 01991-285524 Extn. 2102
website: www.smvdu.net.in

Advt. No.

(Office Use Only)

Regd. No.:

Application Form for Faculty Position

1. Details of application fee payment (if any)

DD No.	Date	Amount	Name of the Bank	Issuing Branch Name

Paste your recent
 passport size
 photograph here

2. Name of the post applied for :

3. Name of the School for which applied :

4. Applicant's area of specialization :

Personal details

5.	Name (in Capital Letters)	First Name	Middle Name	Surname			
6.	Date of birth	Day	Month	Year	Age as on date of advertisement	Years	Months
7.	Place of birth	City/ Village	State	Country			
8.	Father's name						
9.	Mother's name						
10.	Nationality						11. Gender:
12.	Marital status	a. Married / Unmarried b. If married, name of spouse:					
13.	Community/ Category (delete those not applicable)	Gen /SC /ST /OBC / Other Category If other category, give details _____					
14.	If physically disabled, indicate the relevant particulars	If applicable, Write 'yes'	Percentage of disability	S.No. of proof enclosed			
a. Blindness or low vision :							
b. Hearing impairment							
c. Locomotor disability or cerebral palsy (includes all cases of Orthopedically handicapped)							

15. Educational qualifications (Attach additional pages, if required)

	Name of the course	Name of the Board / University	Month & Year passed	Division	% of Marks	CGPA (if grading is applicable)	Subjects studied	S.No. of proof enclosed
10 th Class / equivalent								
10+2 /equivalent								
Bachelor's degree								
Master's degree								
M.Phil. / equivalent								
Ph.D.								
Indicate specifically whether Ph.D. degree has been awarded :						Yes / No		
Whether Ph.D. degree was awarded as per UGC 2009 or 2019								

Regulations:				
Date of Admission to Ph.D. program:				
Date of award of Ph.D. Degree:				
	Subject	Roll No	Year	Position
NET/SLET/SET for lecturership, if any				
GATE Exam passed				

16. Chronological list of experience (including current position/ employment)							
Designation	Pay Band with AGP	Name & address of employers	Period of Experience			Nature of work / duties	S.No. of proof enclosed
			From date	To date	No. of years/ months (As on date of advertisement)		

17. Nature of Teaching experience									
UG Level		PG Level		Post-Doctoral		Any Other		Total	
Years	Months	Years	Months	Years	Months	Years	Months	Years	Months

18. Details of Post-doctoral experience (if any)						S.No. of proof enclosed
Agency	Host Institute	From date	To date	Duration		
Total experience _____ Years _____ Months _____ Days						

19. Academic distinctions		S.No. of proof enclosed
Name of the Academic Course / Body	Academic distinction obtained	

20. Publications (Mention here only numbers. The details and copies of the reprints be appended, without which the information will be considered incomplete)

i. Research Papers in SCI / SCI-E /SSCI/AHCI/ABDC[Cat. A & B]/Scopus/PUBMED [Bio.Tech. & Medicine only] indexed Journals

S No	Authors	Title of the Paper	Journal's Name & Place of Publication	Publication & ISSN No.	Vol./ Page No/ Year	Impact Factor	Indexed in [please specify]

ii. Research Papers in other referred Journals

S No	Authors	Title of the Paper	Journal's Name & Place of Publication	Publication & ISSN No.	Vol./ Page No/ Year	Impact Factor

iii. Chapters in Books /Books published

S No	Authors	Title of the Book	Title of the Article	Place of Publication	Publisher & ISBN	Page No

iv. Review Articles

S No	Authors	Title of the Book	Title of the Article	Place of Publication	Publisher & ISBN	Page No

v. Total Impact Factor as per SCI/ SCOPUS.....

vi. Total Impact Factor as per Google search

vii. h-Index Factor as per SCOPUS.....

viii. h-Index Factor as per Google search.....

ix. i-10 Index Factor as per Google search.....

21. Seminars/ Conferences/ Workshops/ Training programs, etc. attended.	National (No.)	International (No.)	Total (No.)	S.No. of proof enclosed

22. Seminars/ Conferences/ Workshops/ Training programs, etc. organized.	National (No.)	International (No.)	Total (No.)	S.No. of proof enclosed

23. Research Projects / Consultancies (only externally funded)			
Title of projects / consultancies completed	Funding Agency	As PI/CI/Co-CI/CO-PI or Investigator	Amount of grant and duration
Title of ongoing Projects / consultancies			

24. Research Guidance (No. of students guided)	M.Phil. / M.Tech. / M.E. / MBA, etc. (No.)	Ph.D. (No.)	S.No. of proof enclosed
Completed			
Under supervision			

25. Papers presented in Seminars/ Conferences/ Workshops, etc.				
Title of the Paper	National / International	Date	Organizers & Venue	S.No. of proof enclosed

26. Peer recognitions

Awards / Honours	Agency	Year	S.No. of proof enclosed

27. Names and complete postal addresses of 3 referees (The referee should be the last employers of the candidate or any other person having know-how of candidate's experience/knowledge and should not be related to the applicant)

	Referee-1	Referee-2	Referee-3
Names & complete postal addresses			
Email:			
Phone (Landline) with STD Code:			
Mobile Ph:			
Fax:			

28. Present Position

Designation	Name of the University / Institution	Basic Pay (Rs.)	Pay Scale (Rs.)	Gross Pay / Total Salary p.m. (Rs.)	Increment date (Date/Month)	S.No. of proof enclosed

29. Time Required for Joining if selected:

30. Any other information/ qualification relevant to the post applied for:

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31. Whether willing to join as temporary/ contract / Guest faculty (if not selected against regular vacancy) Yes/ No

32. Candidate's Name & Address for correspondence :

	Mailing address	Permanent address		
Name				
Complete Address with pin code				
Email:	Phone No. (Landline with STD code)	Mobile No.	Fax No.	

33. List of self-attested testimonials attached (original to be produced at the time of interview).

Please tick ✓ the ones applicable

- | | | |
|-------|----------------------------------------------------------------------|--------------------------|
| i. | Matriculation mark sheet / certificate | <input type="checkbox"/> |
| ii. | Intermediate mark sheet / certificate | <input type="checkbox"/> |
| iii. | B.E. / B.Tech. / B.A./ B.Sc. /B.Arch (Final) mark sheet/ degree | <input type="checkbox"/> |
| iv. | M.E. / M.Tech./M.A./ M.Sc. /M.Arch(Final) mark sheet/ degree | <input type="checkbox"/> |
| v. | L.L.B (Final) mark sheet / degree | <input type="checkbox"/> |
| vi. | L.L.M mark sheet / degree | <input type="checkbox"/> |
| vii. | M.Phil. degree | <input type="checkbox"/> |
| viii. | Ph.D. /D.Phil. degree | <input type="checkbox"/> |
| ix. | D.Litt., D.Sc., L.L.D degree | <input type="checkbox"/> |
| x. | NET, SET, UGC-JRF, CSIR-JRF Award Certificate | <input type="checkbox"/> |
| xi. | Caste Certificate issued by the Competent Authority (OBC/SC/ST/etc.) | <input type="checkbox"/> |
| xii. | Experience certificates | <input type="checkbox"/> |
| xiii. | Recommendation letter(s) | <input type="checkbox"/> |
| xiv. | Award (s) /Fellowship (s) | <input type="checkbox"/> |
| xv. | Publication (s) | <input type="checkbox"/> |
| xvi. | Other (s) | <input type="checkbox"/> |

Total Number of above self-attested testimonials attached _____ (in words _____)

N.B. Applications without the above self-attested testimonials will not be entertained.

34. Declaration

I, _____ son/daughter of _____
hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the Selection Committee and Executive Council meetings, my candidature / appointment may be cancelled by the University.

Signature of the applicant

*Name as signed (in BLOCK LETTERS)*Application not signed by the candidate is liable to be rejected.

Date : _____

35. Endorsement by the EMPLOYER

- a). In case of in-service candidates in Government / Semi-Government organizations / Public Sector Undertakings / Autonomous Organizations, the endorsement form must be signed by the Head of the Institution/Director/Principal/Registrar.
- b). In case of in-service candidates from Private Sector, acceptance of resignation and relieving letter from the employer at the time of joining must be submitted.

Forwarded to the Shri Mata Vaishno Devi University, Kakryal, Katra-182 320(J&K), India:

The applicant Dr./Mr./Mrs/Ms. _____, who has submitted this application for the post of _____ in the Shri Mata Vaishno Devi University, Kakryal, Katra, has been working in this organization namely _____ in the post of _____ in a temporary / contract/ permanent capacity w.e.f. _____ in the PB of _____, with AGP of Rs. _____. He / She has been placed in Level __ _____, Cell _____ as per 7th CPC Pay Matrix and He / She is drawing a basic pay of Rs. _____. His / Her next increment is due on _____.

It is also certified that no disciplinary / vigilance case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by the Shri Mata Vaishno Devi University, Kakryal, Katra.

(Signature of the forwarding officer)

Name: _____

Designation: _____

Place: _____

Date : _____

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