



गुजरात केन्द्रीय विश्वविद्यालय
CENTRAL UNIVERSITY OF GUJARAT

(Established by an Act of Parliament of India, No 25 of 2009)

Sector - 29, Gandhinagar - 382 030,
Ph. No.079 23977407, Fax: 079 23260076
e-mail: registrar@cug.ac.in, website: www.cug.ac.in

APPLICATION FORM FOR TEACHING POSITION

Details of Bank Payment

DD No. & Date	Bank & Branch	Amount Rs.

For Office Use Only	
Diary No. & Date	

Advertisement No. 19/2015-16

Dated: 28/01/2016

PASTE YOUR
RECENT PASSPORT
SIZE PHOTOGRAPH

(with signature across
the photograph)

1. Name of the Post Applied for:-----

School, and Centre (if applicable):-----

2. Applicant's Area of Specialization: -----

3. Personal Details

Name	First Name			Middle Name	Surname	
Date of Birth	Date	Month	Year	Age as on last date of application	Gender *	
					Male	Female
Father's Name						
Mother's Name						
Marital Status						
Nationality						
Category *	SC	ST	OBC	General		

* Tick mark (√) at the appropriate box

4. If Differently-abled, indicate relevant particulars

Relevant Particular	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)			

5. Address for Communication and Permanent Address

For Communication	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>PIN CODE:</p> <p>Phone No.: (STD Code)</p> <p>Mobile No.:</p> <p>e-mail:</p>
Permanent	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>PIN CODE:</p> <p>Phone No.: (STD Code)</p> <p>Mobile No.:</p> <p>e-mail:</p>

6. Educational/Academic Qualifications

Details of Qualifications	Name of School /Board/ University	Year of Passing	% of marks obtained	Division/ Class/ Grade	Subject(s)
10 th					
12 th					
Graduate					
Post-Graduate					
M.Phil.					
Ph.D.					
NET/JRF/ GATE					
Other(s)					

Designation	Name of the Institution	From	To	Pay Scale /Band with AGP

7. Teaching Experience: P.G. Classes: _____ Years; U.G. Classes: _____ Years.

8. Research Experience

Designation	Institution of affiliation	Area of Research	Duration

Publications

Publications	Published	ISBN/ISSN No.	Accepted/ In Press
Book (s)			
Book (s) (edited)			
Book (s) (co-authored/ co-edited)			
Research articles in peer-reviewed journals			
Chapters in book (s)			
Patents	Filed:	Granted:	

Note: Detailed information regarding publication giving ISBN/ISSN No. of book(s) and impact factor of journal(s) may be given on separate sheets.

9. Seminars/Conferences/Workshops/Symposiums/Training Programme, etc.

	In India	Abroad
Organised		
Participated as Paper Contributor /Resource Person/ Presenter / Discussant		
Attended		

Note: Detailed information may be given on separate sheets.

10. Affiliation in Academic Bodies/Societies

Name of the Body/Society	Nature of Affiliation

11. Research Guidance/ Supervision

	M.Phil./Equivalent	Ph.D.
Degree Awarded		

Note: Detailed information may be given on separate sheets.

12. Research Projects

Research Project	PI,CO-PI, Other(s)	Date of Commencement	Date of Completion	Funding Agency	Amount Sanctioned

Note: If required, information may be given on separate sheets.

13. References (three)

i. Name: _____

Postal Address: _____

e-mail id: _____

Phone No. (landline) with STD Code No.: _____

Mobile No.: _____

Fax No., if any: _____

ii. Name: _____

Postal Address: _____

e-mail id: _____

Phone No. (landline) with STD Code No.: _____

Mobile No.: _____

Fax No., if any: _____

iii. Name: _____

Postal Address: _____

e-mail id: _____

Phone No. (landline) with STD Code No.: _____

Mobile No.: _____

Fax No., if any: _____

14. Write a note on a separate sheet in about 200 words stating the nature of your contribution towards the future progress of Central University of Gujarat.

15. Are you willing to accept the minimum initial pay in the Pay Band? If not, justify your claim.

LIST OF ENCLOSURES: (*Attach copies of certificates, sanction orders, papers etc. wherever necessary*)

1	-----	9	-----
2	-----	10	-----
3	-----	11	-----
4	-----	12	-----
5	-----	13	-----
6	-----	14	-----
7	-----	15	-----
8	-----	16	-----

I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature is liable to be cancelled/ my appointment is liable to be terminated.

Place: _____

Date: _____

Signature of the Candidate

ENDORSEMENT OF THE EMPLOYER (IF APPLICABLE)

Ref. No.....

Date.....

1. The application of _____ is hereby forwarded with the remarks that we have No Objection to her/his application being considered by the Central University of Gujarat.
2. Certified that the information given by the applicant in this application form has been checked / verified and found to be correct with reference to her/his service records.
3. It is certified that no vigilance case is pending/contemplated against the applicant and she/he is clear from vigilance angle.

**Signature of the Employer
(with office seal)**