**APPLICATION FORM**

**Application for the engagement as Adjunct Faculty**

|  |
| --- |
| **Personal Details** |
| * **Name (Capital):** * **Birth Date:** * **Age:** * **Sex:** * **Marital Status:** |
| **Contact Details** |
| * **Address(Present) :**     **(Permanent):**   * **Mobile No:** * **E-mail ID:** |
| **Educational Qualification**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Degree** | **Institute** | **University** | **Percentage** | **CGPA** | **Class** | | **Bachelor**  **Degree** |  |  |  |  |  | | **Master**  **Degree** |  |  |  |  |  | | **Ph.D** |  |  |  |  |  | | **Any Other (Mention)** |  |  |  |  |  | |
| **Experience Details** |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Designation** | **Institute** | **Type**  **(Aca/Ind/R&D/Reg** | **From** | **To** | **Total** | |  |  |  |  |  |  | |  |  |  |  |  |  | | **Grand Total** |  | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Research Publications** | | | | | | **Sr. No.** | **Title** | **Journal** | **Year, Vol, Page no.** | **UGC/SCI/AICTE Approval Number** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |
| **Ph.D Supervision** |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Sr. No.** | **Name of the Scholar** | **Year of Regn** | **Year of Awarding Degree** | **Topic of Research** | **University/Institute** | **Co-Supervisors Name** | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |
| **References** |
| **Reference 1:**   * **Name and Designation:** * **Address:** * **Mobile No:** * **E-mail:**   **Reference 2:**   * **Name and Designation:** * **Address:** * **Mobile No:** * **E-mail:** |

**Signature of Candidate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**