]	For Office	Use Only	
Apı	plication received on		_ Registration Number _	
			C	
	APPLICATION FOR THE PO		RINCIPAL / PHYSICAL / the candidate)	L DIRECTOR
Advertisement Number :		Timed in by	the candidate)	Affix recent passport size photo here and
Naı	me of the College applied for:			attest (Do not staple)
S. N.	Particulars		Detai	ls
1	Name (In capital letters)			
2	Father's / Husband's Name			
3	Date of Birth			
4	Place of Birth			
5	Age (as on last date of submission of	application)		
6	Sex (Male / Female)			
7	Marital Status			
8	Nationality			
9	Religion			
10	Category (UR/SC/ST/OBC)			
11	Do you belong to Physically Chacategory (If yes enclose relevant cert	•		
12	Address for correspondence			
	PIN code			

Mobile No
13 Permanent Address

PIN code Mobile No

Academic Qualifications (Secondary School Examination onwards)									
Examination/ Degree	· · · · · · · · · · · · · · · · · · ·		Subject / Year of specialization Passing		CGPA/ % Marl	Division	Proof Encl. No		
High School / Secondary									
Sr. Secondary									
BE / B.Tech.									
ME / M. Tech.									
Ph.D.									
Other									
Details of experience in academic instauration(s)/research organization(s)/Chronological									
Post Field	Organization		Period	l	Pay Scale	Basic Pay	Proof		
		From	To	Duration		or AGP/GP	Encl. No.		
Details of industrial / field experience / Chronological order									
Post Field					Proof				
		From	То	Duration		Monthly Enrollment	Encl. No.		
	Examination/ Degree High School / Secondary Sr. Secondary BE / B.Tech. ME / M. Tech. Ph.D. Other Details of exporder Post Field Details of individuals of indindividuals of individuals of individuals of individuals of indivi	Examination/ Degree High School / Secondary Sr. Secondary BE / B.Tech. ME / M. Tech. Ph.D. Other Details of experience in acader order Post Field Organization Details of industrial / field exp	Examination/ Degree Subject Subject Secondary Secondary Sr. Secondary Sr. Secondary Secondary Sr. Secondary Special Secondary Sr. Secondary Secondary Special Secondary Special Secondary Special Special Special Secondary Special Sp	Examination/ Degree High School / Secondary Sr. Secondary BE / B.Tech. ME / M. Tech. Ph.D. Other Details of experience in academic instauration (sorder Post Field Organization Period From To Details of industrial / field experience / Chronol Post Field Organization Period Post Field Organization Period Post Field Period Post Field Organization Period Post Field Organization	Examination/ Degree Board University Subject / specialization Passing	Examination/ Degree Subject / specialization Passing CGPA/ % Mark	Examination Board University Subject Specialization Passing CGPA Marks		

17	Details of Scholarship / Awards / Honors / with proof (Attach separate sheet if required)	Proof Encl. No.
18	Details of Academic achievement with proof (Attach separate sheet if required)	
19	Developed / Participation in production of educational programs with proof (Attach separate sheet if required)	
20	Conducted short Term / Continuing Education Programmers' / Other Courses w (Attach separate sheet if required)	ith proof
21	Attended STTP / Conference / Workshop / Symposium etc. (Attach separate sheet if required)	
1		i

22	Special Training / Assignment (Attach separate sheet if required)				
22	Dublication				
23	Publication (A) Research Papers				
	Papers in	Published (Nos)	Accepted (Nos)	Communicated (Nos)	Remarks
	Referred International Journals				
	Referred National Journals				
	Conference / Symposia				
	Books				
	(B) List of Publications in Journa				
	Details (Author(s) / Title / Volum	ne / Page / Y	ear)	Cumulative Impact Factor	Proof Encl. No.
	(C) List of Publications in Confe	rence Proce	edings (Atta	 ch separate sheet if requ	uired)
24	Details of IPRs / Patents etc. (Att	tach separat	e sheet if red	quired)	Proof Encl. No.

25	Thesis Supervision (in number)								
	Description	Awarded	Summated		In Progress	Encl. No.			
	Ph.D.	71Waraca		iteu	milogicss				
	M.E. / M. Tech.								
	Others								
26	Sponsored Research / Consultancy Project (Attach separate list if required)								
	Name of	Funding	Amount	St					
	Project	Agency	(in Rs. Lakh)	Completed	In Progress				
27	Membership / Fellowship of Professional Bodies / Societies								
28	Administrative responsibility held in chronological under (Attach separate list if required)								
	Position field	Organization	Nature of		riod	Proof			
			responsibility	From	То	Encl. No.			
					1				

29	Two meterones						
29	Two references			(")			
	(i)			(ii)			
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	Mobile No:			Mobile N			
	(iii)			TOOM 1	10.		
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	Email ID:			Email ID:			
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30		ent Employee :					
	Name &	Contact Number	Nature of	Pay	AGP /	Other	Total
	Address	(Phone, Mobile)	Present Pos	st Band	GP	Allowance	Enrollment
			(Mark $$)				
			Permanent				
			Temporary				
			Ad-hoc				
			Contractua	1			
31	If appointed, r	ninimum time yo	u will rean	ire to ioin	on the n	ost?	
		J -	· · · · · · ·		P		
32	Any other info	ormation you wisl	to give (A	ttach exti	·a sheet it	f required)	
32	ring other mic	illiation you wisi	i to give (11	ttacii cati	a silect ii	requireu	

Declaration by the candidate

I, hereby, declare
that the information given by me in this application form is true the best of my knowledge and
belief. If, at any time, I am found to have concealed any material / information or given any false
information, my candidature / appointment may be summarily rejected / terminated without any
notice or compensation and I am liable for legal action against me.
Signature of Applicant
Place : Date :

This certificate is to be issued on the institute / organization / industry's official letter head

(This certificate must be signed by the employer in case of the candidate already in service whether in permanent / ad-hoc / temporary capacity)

CERTIFICATE FROM THE PRESENT EMPLOYER

Ref. No.:	Date:
Forwarded Sh./ Smt / Dr	bearing the
designation of	holds the post in our institute / organization
in permanent / Ad-hoc / temporary / contra	actual capacity.
He / She is drawing the pay in the	pay-band / scale with
AGP / GP	This institution / organization has no objection to the
candidature of the applicant being consi	dered for appointment to the post of Principal in the
college	
	Signature of the Employer with seal
	Name:
	Designation:
Place:	
Date:	