For Post of <u>Assistant Professor</u> No	JU Application Information Sum			Paste recent photograph
SB Collect Reference No. DU				here and sign across
1. Post Applied for	De	ept./School <sup>*</sup>		
2. Advertisement no. with date				
3. Name of the Applicant in full (BLOCK Letters)	(First)	(Middle)	(Last)	
4. Current position held			since	

5. Teaching/Research/Industrial Experience (Most recent first)

Sl. No.	Previous Positions held	Employer/ Organization	Period/Duration of the position/work

Use additional sheet, if necessary

6. Date of birth (DD/MM/YYYY) .....

7. Category	GEN	SC	ST	OBC-A	OBC-B	Minority	PWD/PC
(Please tick)							

8. Qualified for (Please tick)

A.	NET	SET	GATE	None	

В.

	Title of Research	University	Duration of	Degree obtained/
			Programme	thesis submitted
			-	in the Year
M.Phil/M.Tech.				
Ph.D.				

9. Whether Ph.D. is done under the UGC 2009 Regulation (Y/N) ...... Those who have done Ph.D. outside India, whether a Ph.D. course work was attended (Y/N) .....

Dated.....

Full Signature of the Applicant Mobile No.:

<sup>\*</sup> Strike off whichever is not relevant.

No. .....

# Jadavpur University Application Form

1.	Post Applied for			Dept./	School <sup>*</sup>			
2.	Advertisement no.	with date						
3.	Name of the Applio (BLOCK Letters)				(Middle)		(Last)	
	Contact details Address (a) Permanent							
	(b) Address for Con	nmunication						
(ii	) Email							
(ii	i) Phone (Mobile)				Resi./Off	ice		
5. I	Date of birth (DD/MI	M/YYYY)						
6.1	Nationality By birth	۱		. At pro	esent			
7. 5	Sex (Please tick) M	lale / Female						
8. 0	Category	GEN	SC	ST	OBC-A	OBC-B	Minority	PWD/PC
(	Please tick)							
9. 1	Father's Name/ Mc	other's Maid	en Name					
10.	Applicant's mothe	er tongue						
11.	Other languages the	he applicant	can speak/	write/read	fluently (str	ike off whi	chever is no	ot
	relevant)							

<sup>\*</sup> Strike off whichever is not relevant.

# 12. Academic Records

S	1 _ · · ·	[	
			Subjects/
		With % of Marks	Discipline*
Examining Body			
	Completion		
	Board/Council/ University/Other Examining Body	University/Other the Course	University/Otherthe CourseWith % of MarksExamining Body&Year of

\* State the name of the degree (such as BA/BSc/B.Tech, MA/MSc/ME/M.tech etc,), Honours/major subject in case of graduation and subject/discipline and area of specialization in case of post-graduation and for higher degrees obtained

# 13. Research Activity (documents to be produced)

a) Prestigious Honours and Awards received with name of awarding agency/government and year

(should be recognized by the international agencies or the departments/ agencies of national/state governments; documents to be attached)

# b) Post Doctoral Fellowship of at least 2 months duration received and availed of: (documents to be attached)

Name of the Fellowship	Funding Agency/Institute	Host Institution	Period

c) Research projects carried out/ongoing funded by government funding agencies/industries or organization of National and International repute (*state whether Sole, Principal or Co Investigator*) (documents to be attached)

Title of the Project	Funding Agency/Institute	Period	Completed/	Amount
	Agency/Institute		ongoing	

Use additional sheet if necessary.

d) Number and details of Patents/Technology Transfer: .....

(list details with year in an additional sheet; documents to be attached)

e) [	Number of Polic	y documents for	Government	Bodies at	Central &	: State	level.			
------	-----------------	-----------------	------------	-----------	-----------	---------	--------	--	--	--

(list details with year in an additional sheet; documents to be attached)

f) Training courses/ workshop attended

(Note: <u>For Physical Education Department</u>: Specific sports coaching/training courses attended in Yoga, Yoga therapy, Physiotherapy; Extension services through NSS/NCC; <u>For Department of ACCE</u>: Attending Continuing education courses)

(documents to be attached)

Title of the Course	Nature of the	Sponsoring/	Duration	Host /Organizing
	course/workshop	Funding Agency	of the Course	Institute

g) Number of Papers presented in conferences/seminar etc. (by self or by co-authors)

- International .....
- National/State level.....

14. **Publications** (details of all publications should be listed in additional sheets with copies of first/Title page being attached; otherwise no credit shall be given to the numbers stated below)

#### a) Journal Publications:

(i) Number of papers in Refereed Journal:

- - (ii) Number of Monographs published by national level Publishers with ISBN/ISSN numbers
    - Sole author.....

<sup>(</sup>NB: 1) List details with title of the paper, year and host institution in an additional sheet. Participation certificates must be attached, otherwise no credit shall be given to the numbers claimed above; 2) If a paper presented in a conference/seminar is published in the form of Proceedings or Edited Volume, it should be listed only under Publications.)

• co-authored: (State number of co-authors)..... ..... (iii) Number of Reference Books/Textbooks published by International Publishers with an established peer review system Sole author • co-authored: (State number of co-authors)..... (iv) Number of Reference Books/Textbooks published by national level Publishers with ISBN/ISSN numbers • Sole author..... • co-authored: (State number of co-authors)..... ..... c) Number of Chapters contributed in Edited Volumes published by (i) international publishers: • Sole author..... • Co-authored: (State number of co-authors)..... ..... (ii) national level publishers: • Sole author..... • Co-authored: (State number of co-authors)..... ..... d) Number of Translation work (for Social Sciences/Humanities/Arts) State whether book length or short piece of work • Sole author • co-authored: (State number of co-authors)..... ..... e) Number of Annotated Editing of Texts/Literary works published by publishers with ISSN/ISBN numbers (for Social Sciences/Humanities/Arts) • Sole author • co-authored: (State number of co-authors).....

.....

f) Number of Editing of Volumes published by publishers with ISSN/ISBN numbers

- Sole author.....
- co-authored (State number of co-authors).....

.....

.....

# g) Number of Full paper in Conference Proceedings

- Sole author.....
- co-authored: (State number of co-authors).....

# 15. Name and contact details of two referees

Profession/Position	Institutional Affiliation	Address and Contact
-		
-		

16. Additional Remarks, if any:

# Declaration

I declare that the entries made in this form are true to the best of my knowledge and belief.

Date.....Place....

Signature of the Applicant

- N.B. (i) Papers and documents submitted with the application will not be returned.
  - (ii) Application, if sent by post should be sent under certificate of posting, preferably by registered post.
  - (iii) Separate sheet(s) must be attached wherever applicable and necessary
  - (iv) One original and seven photocopies of the duly filled-in application forms are to be submitted. All enclosures including self-attested copies of testimonials are to be submitted in single copy each.
  - (v) Copy of SB Collect Payment Receipt must be attached with the application
  - (v) All claims made above must be substantiated by attaching relevant documents.