COLLEGE OF COMMERCE & MANAGEMENT STUDIES



MOHANLAL SUKHADIA UNIVERSITY UDAIPUR-313001

Application Form for Empanelment of Guest/Visiting Faculty

| 01. | Name of Service | • | |
|-------|----------------------------|--|---|
| | (please fill Teach | ning Consultant or Visiting Faculty or Placement Consultant) | |
| | Subject | : | Photograph |
| | Faculty | : | |
| 02. | Caste / Category | : | |
| | if OBC(Non-creamy layer) | /ST/SC: | |
| | Name the Authority issuing | Caste Certificate: | |
| | Place of Issue: | State: | Signature |
| 03. | Differently abled | : | |
| 04. | Payment Method / Transact | ion ID: | |
| | | /Date/Time | |
| Perso | onal Information | | |
| 05. | Applicant's Name | · | |
| 06. | Father's /Husband's Name | · | |
| 07. | Mother's Name | ÷ | |
| 08. | Applicant's Date of Birth | ÷ | |
| 09. | Gender | ÷ | |
| 10. | Marital Status | · | |
| 11. | Applicant's E-Mail ID | ÷ | |
| 12. | Applicant's Mobile No. | : | |
| 13. | Nationality | ·: | |
| 14. | Permanent Address | : | |
| | | | |
| | | | |
| 15. | Present Address | ÷ | • |
| | | | • • • • • • • • |
| | | | |
| Acad | <u>lemic performance</u> : | | |

16. Educational Qualification:

(give detailed information about past academic performance from Secondary onwards (attach self attested copies of mark-sheets)

| S. No. | Examination Name | Year | Board /Univ. | Max. Marks | Marks Obtained | Percentage |
|-----------|------------------|------|--------------|---------------|-------------------|------------|
| 1 | Xth | | | | | |
| 2 | XIIth | | | | | |
| 3 | UG | | | | | |
| 4 | PG | | | | | |
| 5 | Diploma | | | | | |
| 6 | Other | | | | | |

| | Resear | ch Degree: | | | | | | | | | | |
|-------------|---------|--------------------------------|--------------------|--------|----------|------------------|-------|--------------------|-----------|---|---|--|
| | S.No. | | Titl | e | | | D | ate of Awar | d | Universi | ty/Institute | |
| | 1 | M.Phil. | | | | | | | | | | |
| | 2 | Ph.D. | | | | | | | | | | |
| | 3 | D.Sc./D.Lit. | | | | | | | | | | |
| | Eligibi | Eligibility Test: NET/SLET/JRF | | | | | | | | | | |
| | S.No. | | | | A | gency cond | duct | ed the test | | | Year | |
| | 1 | J.R.F. | | | | <u> </u> | | | | | | |
| | 2 | N.E.T. | | | | | | | | | | |
| | 3 | SLET/SET | | | | | | | | | | |
| | | D . 11 | | | | | | | | I | | |
| | | ation Details: | | TC:41 | C I | 1/D1- | TO | CNI/ICDNI | 11 | 1/C - £ | M 41- 0 | |
| S. Title | | | Title of Journal/B | | nal/Book | l/Book ISSN/ISBN | | Hard/Soft | | Month & Year | | |
| | 110. | | | | | | | | | | 1 cai | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | <u> </u> | | | |
| | | er covered unde | | | | | | | NO) | | | |
| | (i) | Ph.D. under U | | | | = | | | | • | ••••• | |
| | (ii) | Obtained criter | ria cert | ificat | e as per | UGC Norn | ns (` | YES/NO) | | • | • | |
| | m 1: | | | | | | | | | | | |
| | | ng Experience: | | NT | - C | | D | C | C - | 1 | D C | |
| S. No. Desi | | . Designation | Designation Name | | | | | alary ith grade | Reason of | | | |
| | | | | Empl | Oyei | Joining | 3 | Relieving | W | illi grade | Leaving | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | + | | | | | | |

| ••••• | | |
|-------|---|---------------|
| | | |
| ••••• | • | • • • • • |

| 23. | Other | Experience: |
|-----|-------|-------------|
| | CHICI | Emperione. |

| S. | Designation | Name of | Dates of | | Salary | Reason of |
|-----|-------------|----------|----------|-----------|--------|-----------|
| No. | | Employer | Joining | Relieving | with | Leaving |
| | | | | | grade | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |

| | S. No. | Name | Designation | Office Address, Mobile No. and email | Residential Address and Landline Number, if any |
|--|---|---|---|--|---|
| | 1. | | | | j |
| | 2. | | | | |
| 25. | - | | - | | ny of the columns above. |
| | | | UNDERTA | KING | |
| Visiting of word empands be discusted executed conditional of the placement of the placemen | g Faculty k and it elment vectual continued e a bond ons of the er undert ent Cor | y or Placement of some not a processivill be on work and. In case of engrapensation presson non judicial ne bond. | Consultant is purely a tiles of regular appointment prequirement basis and in agement from the list of cribed and will not be enstamp of Rs. 100/- in the made by the concerned | me being arrangement ent. Further, the engage case of no work existence of the empanelment, I shall titled for any other being prescribed format the Teaching Consultated departments/college panelment shall does | as Teaching Consultant or at to meet out the exigency gagement from the list of gency, the engagement can I be entitled to get only the enefit of any kind and I will and abide by the terms and ants or Visiting Faculties or ge/institute subject to their a not entitle me in any way |
| Date: | | | | S | ignature |
| | | | DECLARA | <u> FION</u> | |
| | nformat cancell | | be incorrect, I shall be fu | lly responsible for th | e same and my candidature |
| Date : | | | | S | ignature |
| | | | | | |

 $\underline{\text{Two references of the persons equal to or above the rank of Gazetted Officers of the Govt.:}\\$

24.