Application for the post of Vice Chancellor	Affix the latest passport size photo

(Applicant is requested to type the information in the following format, and can add more lines in the format wherever required.)

1. GENERAL INFORMATION OF APPLICANT:

Name	
(In Capital Letters)	
Date of Birth	
(Day/Month/Year)	
Correspondence	
Address	
	Mobile No. :
Phone No.	
	Landline No.:
Email	

2. PRESENT POSITION:

a.	Designation	
b.	Organization	
c.	Pay Scale	
d.	Date of	
	appointment to	
	the present post	
e.	Total Experience	
	(In Years and	
	Months)	

3. DETAILS OF EXPERIENCE POSSESSED AS PER ELIGIBILITY CRITERIA:

S. No.	Post Held	Pay Scale	Organisation	Nature of duties	Experience (In Years and Months)

4.	EDUCATIONAL QUALIFICATION (In chronological order from latest to Graduation level)							
S.	Qualification	University	Year	Subject(s)/	%	Distinctions		

S. No.	Qualification	University	Year	Subject(s)/ Topic(s)	% Achieved	Distinctions etc.

5. ADMINISTRATIVE EXPERIENCE/POST(S) & RESPONSIBILITIES HELD:

S.	Post	Organization/	Du	ration	Experience
No.	U	University	From (Date)	To (Date)	(In Years and Months)
1.	Head of the Department				
2.	Chairman, board of Studies				
3.	Member, Board of Studies				
4.	Dean of Faculty				
5.	Member of Academic Council				
6.	Member of Executive Council				
7.	Member of Professional/ Academic Bodies				
8.	Others (Specify)				

6. (a) Academic/Teaching Experience & Responsibilities:

(In chronological order from latest to Oldest)

S.	S. Post Organization University	Organization/	Dur	ation	Experience	
No.		University	From (Date)	To (Date)	(In Years and Months)	

(b) Participation and contribution in relevant areas in higher education :

	Organisation	Area of specialisation
Visiting Professor		
Resource Person		
Others (Specify)		

(c) Involvement with formulation of academic programmes :

S.	Nomenclature of Innovative Academic	Date of approval by	Year of
No.	Programmes formulated	Academic Council	Introduction

(d)	(d) Important MoUs formulated for academic collaborations :							
S. No.	MoUs formula	ated		Name of Agencies/ Departments involved.			Year of MoU	
(e)	Position of	Chairs :						
S. No.	Name of Chair			Name o Departr	_		Period of holding Chair	
7. INTERNATIONAL ACADEMIC EXPOSURE, IF ANY :								
S.	Post/	Organization/	Area of			Du	ration	
No.	Assignment	University	Assignme	ent	From	То	In Years & Months	
8. A. C		ACHIEVEMENTS Journals and Bo						
						Details		
	ks authored							
	or in Chief							
	orships							
	reviewer for	rnational Advisory	Board					
	ers (Specify)	iliational Advisory	Doard					
	ublication :							
	B.I. Kindly provide list of scholarly publications in recognised professional and/or academic journals:							
	Total Publications :							
S. No.	Date	Title		Name of Jo	urnal	Refereed journal or not	Number of Citations (where possible)	

B.II.	List of Articles i	n popular ma	gazin	es or newspapers :				
	Total Article	es	•••••					
S. No.	Date	Title				Name of Magazine Newspaper	e/	
C. Pa	articipation an	d scholarly p	orese	entations in confere	ences :			
C.I. N	lational :							
S. No.	Date	Title of Con	ferer	ice or Institution	Title/S	ubject of presentat	ion (if made)	
C.II.	nternational :							
S. No.	Date	Title of Con	ferer	ice or Institution	Title/S	ubject of presentat	ion (if made)	
	articipation a			in National/Interna ertise :	itional Fo	ra in the area of	your	
						Number(s)		
Plena	ary Lectures/In	vited Talks	International					
			National					
Cong	resses attende	d	International					
			National					
Exan	ninership etc.		International					
011	(6		National					
Otne	ers (Specify)			ernational ional				
9.	RESEARCH	PROJECTS :	IVat	ionai				
S. No.	Client/Organi Name	sation's	Na	ture of project		Duration of project	Amount of grant (Rupees)	
10.	10. CONSULTING EXPERIENCE:							
	-		men	ts undertaken :		_		
S. No.	Client/Organi Name	sation's		Nature of assignme	nt Duration of assignment		gnment	

11.	HONOURS/AWARDS & FELLOWSHIPS FOR OUTST/	ANDING WORK
	HONOURS/AWARDS & I LLLOWSHIPS FOR OUTST	AINDIING WOI

S. No.	Name of Award/Fe	ellowship	Elected/Honorary Fellow	Awarded by	Year of Award		
12.	NO. OF RESEAR	CH SCHOLAR	S SUCCESSFULLY GUID	ED :			
Name of Programme		Awarded (Awarded (No.) (Under-progress not to be included)				
13.	STRENGTHS (in	100 Words)					
14.	YOUR VISION FO	OR THE UNIV	ERSITY (up to 500 Wor	ds)			

15. DETAILS OF REFEREES, if any:

S. No.	Name of the Referee	Post Held by Referee	Email	Phone No.	Mobile

I, hereby, declare that all the statements/particulars made/furnished in this application are true, complete and correct to the best of my knowledge and belief. I also declare and fully understand that in the event of any information furnished being found false or incorrect at any stage, my application/candidature is liable to be summarily rejected at any stage and if I am already appointed, my services are liable to be terminated without any notice from the post of Vice- Chancellor as per Act/Statutes etc. and other applicable rules.

Place:	(Signature of the Applicant)
iacc .	(Signature of the Applicant)

Date:

Note: Total No. of pages (A_4 size) of the Application should not exceed 10 pages.