



APPLICATION FORM FOR TEACHING POSTS

			so provide the information in A		
	Post applied for:				C II
	Department :				Self – attested
1. I	Name of the Applicant	:	-		Photo
2. I	Father's Name	:			
3. 1	Mother's Name	:			
	Date of Birth and Age (as on the last date of applic	cation) :			
5. (Gender	:			
6. I	Marital Status	: <u>.</u>			
7.					
				PIN	
8.	Contact number :(Cell	and What	sApp no.)		
9.	Email-ID	:			
10.	Nationality	:			
11.	Aadhar Card Number	:			
12.	Have you qualified for	NET/SLE	T/KSET YES / NO	(attach proof as	applicable)
13.	Have you been award	ed Ph.D.	YES / NO	(attach proof as	applicable)
14.	Details of Fee paid				
	DD Number & Date	Amount	Name of the Bank	Issuing Branc	h's Name
	F	Rs.500/-			





(University established by an Act No. 18 of Karnataka State Legislature)

15. **Educational Qualifications** (in *Chronological Order from Xth class onwards. Attach self-attested copies of certificates / degrees as applicable*)

S.No	Qualification	Specialization (if any)	University/Board	Year of Passing	Percentage of Marks
1.					
2.					
3.					
4.					
5.					
6.					

16. Experience:

(attach self attested xerox copies of certificates)

SI.	Designation	College/University/ Industry	Experie	ence	Total Experience	Salary
No		industry	From	То	(Year and months)	

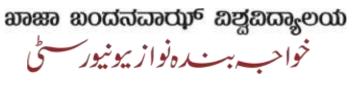
17. Publications:

Sl.No.	Title of Paper / Book / Edited Chapter	Publisher / Journal	Year of Publication

18. No. of Research students successfully guided:

Sl.No.	UG	PG	Ph.D.





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19. Awards, Fellowshi	ps:
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Email ID.....

SI No	/\Warde/ Fallowenine	Organization		
0. Me n	bership of Professional Bodies:			
SI.No.	Affiliation and Memberships	Organization	Registration Number and Date	
	tion the names of two referees from whom r	eference about your workin		
	ATION	DESIGNATION		
	ISATION	ORGANISATION		

SIGNATURE WITH DATE

Email ID