



Application for Recognition as a Post Graduate Teacher

I wish to apply for Recognition as a Post Graduate Teacher
in the subjectunder the faculty of

Recent
Photograph

A. Personal Details:

1.	Name of the candidate (in capital letters, as shown in statement of marks in qualifying examination)	
2.	Designation	
3.	Name and address of the college where applicant is employed	
4.	Date of birth	
5.	Email id	
7.	Mobile Number	
8.	Correspondence address	
6.	Gender	
7.	Category	
8.	Name of college/institution where applicant proposes to teach (Furnish details of facilities available in a separate sheet)	

B. Self Assessment by the applicant:

Sr. No.	Details	Please tick appropriate
1.	Ph.D. with 3 years of approved teaching experience at UG classes	
2.	M. Phil. with 5 years of approved teaching experience at UG classes	
3.	Respective PG in 1 st class with 6 years of approved teaching experience at UG classes	
4.	7 years of approved teaching experience at UG classes in case of others	

Candidates should attach only following documents with application in the given order:

1. Ph.D. Notification (as applicable)
2. M. Phil. Notification/degree certificate (as applicable)
3. University approval letter for regular appointment (mandatory)
4. Proof of Payment towards processing of application of Rs.100/- + Form fees Rs. 25/-

C. Education Qualification

Sr. No.	Degree	University	Class obtained	Year of passing	Subject
01.	Under Graduate Degree				
02.	Master Degree				
03.	Doctoral Degree				
04.	Post doctoral degree if any				

D. Experience:

Sr. No.	Teaching experience	Name of the college	From	To	Total Experience (year, month and days)
1.	UG Classes				
2.	PG Classes				

E. Research publications (if any)

Sr. No.	Title of paper published	Name of the Journal	Details of Publisher	Page Nos	Date, Month and year of publication
1.					
2.					
3.					

I hereby declare that all the facts and information given above are true to the best of my knowledge. I take full responsibility for its accuracy and authenticity.

Candidate's Signature

F. Experience Certificate:

This is to certificate that Dr..... is working since (Date) as a in the department of of this college/school. He is having total approved teaching experience of (years, month and days).

Seal and Signature

Principal/Director of the institution where the applicant is employed

G. Forwarding of application:

We are forwarding the application of Mr./Dr. for recognition as a Ph.D. guide in the subject..... for further processing at university level.

Seal and Signature

Principal/Director of the College/Institution

H. Particulars of Payment towards processing of application of Rs.100/- + Form fees Rs. 25/-

Receipt No.

Date:

For Official Purpose

Research Recognition Committee (RRC) Remarks:

Remark	Committee Recommendations	If not recommended state the reason
Recommended / Not Recommended		

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Details	Name	Signature
Hon. Pro - Vice Chancellor, Chairman of RRC		
Dean of the faculty, Member, RRC		
Associate Dean of the faculty, Member, RRC		
BoS, Chairman, Member RRC		
Experts (Internal), Member RRC		
Experts, Member (External) RRC		

Board of Deans (BoD) Remarks:

Remark	Decision
Approved / Not Approved	

Details	Name	Signature
Hon. Pro - Vice Chancellor, Chairman of RRC		
Dean of the faculty, Member, RRC		
Associate Dean of the faculty, Member, RRC		