



SATAVAHANA UNIVERSITY

KARIMNAGAR – 505 002
Andhra Pradesh, INDIA

For Office use only	
Receipt No. & Date	
Entry No.	

APPLICATION FOR THE POST OF ASSISTANT PROFESSOR

To be sent to the Registrar, Satavahana University so as to reach him on or before 12-02-2014 by 5.00 p.m.

Important Note:-

- Read carefully Information Brochure before filling the form
- The entries should be in the candidate's own handwriting / Type-written on a Computer
- Attach all enclosures in the serial order as per columns of application-form
- Copies of supporting documents should be enclosed in support of the information given in the application form. Otherwise, application will be rejected.

Paste recent color
pass-port size
photograph here
(Don't Staple)

Notification No. & Date :	
Post Applied for :	
Subject :	
Post Reserved for :	

Details of Demand Draft of Registration Fee *			
<i>(The application form not accompanied by the DD will not be considered)</i>			
Name of the issuing bank (indicate place, town where the bank is located)	DD Number	Date	Amount (Rs)

* Rs.500/- (Rupees Five hundred only) towards Registration Fee and Rs.300/- (Rupees Three Hundred only) for Scheduled Caste/Scheduled Tribes/Physically Challenged Persons. Demand Draft should be drawn in favour of Registrar, Satavahana University, Karimnagar payable at S.B.H., Main Branch, Karimnagar. Money-Order, Postal-Orders will not be accepted. Write Name, Address and post applied for on the back-side of the D.D.

PART – A : PERSONAL DETAILS (In Capital Letters only)

1.	Name in full	
2.	Father's Name & Occupation	
3.	Mother's Name & Occupation	
4.	Date of Birth & Age in years (as on the last date of receipt of application)	
5.	Place of Birth	Village/Town :
		Mandal :
		District :
		State :
6.	Gender (MALE / FEMALE)	
7.	Social Status with sub-caste (SC/ST/BC-A/BC-B/BC-C/BC-D/BC-E/ OBC/OC)	Social Status :
		Sub-Caste :

8.	Religion	
9.	Nationality	
10	State whether you are married	YES / NO
11	Particulars of Physical Disability, if applicable,	VH / HH / OH : Percentage of Disability :
12	Address to which communication to be sent <i>(The University shall not be responsible if the letters are not received at this address)</i>	H. No.
		Street :
		Village/Town/City :
		District :
		State :
		Postal PIN Code :
		Telephone Number with STD :
		Mobile Phone Number :
		E-mail ID :
		FAX :
13	Permanent Address	H. No.
		Street :
		Village/Town/City :
		District :
		State :
		Postal PIN Code :

14. Educational qualifications (from SSC onwards) :

Name of Degree/Exam	Name of the Board / University /Institution	Subject	Month & year of passing	Per-centage of Marks	Division/ Class/ GPA	Sl. No. of proof enclosed
SSC						
Intermediate						
UG						
PG						
M.Phil.						
Ph.D.						
NET/SLET/SET						

15. Title of Thesis :

Course	Title	Date of Registration	Date of Award	Sl. No. of proof enclosed
Ph.D.				
M.Phil.				

16. Number of Articles / Books published:

	Number Published	Number Accepted / In print	Sl. No. of proof enclosed
Articles			
Books			

17. Academic Distinctions (Award / Scholarship / Rank etc.) :

Particulars	Sl. No. of proof enclosed

18. Have you been outside India? If so, furnish the following information:

Country visited	Duration of visit		Purpose of visit (other than personal grounds)	Sl. No. of proof enclosed
	From	to		

20. Are you employed? If so, give the following particulars (give the particulars of UG & PG teaching experience):

Post/Designation held	Name of the institution & Name of the employer	Nature of employment (Part-time/ contract/ ad-hoc / permanent)	Date of joining	Date of Leaving	Scale of Pay	Total emoluments per month	Sl. No. of proof enclosed

21. If appointed, how much time do you need for joining this University?

22. Are you willing to accept the minimum initial pay offered? If not, mention the lowest initial pay you would accept and the justification there for.

- 23. References:** *(These should be persons residing in India holding responsible positions. They should be intimately acquainted with the applicant's conduct and character but must not be his/her relative. Candidates are not expected to approach directly any of the persons whose names they give for reference. If the candidate is employed, he/she should include the employer or immediate superior as one of the references):*

	1	2	3
Name			
Occupation			
Address			
Phone No.			
E-Mail ID			
FAX			

- 24. Applicants are requested to write down their current and future academic plans in about 200 words.**

DECLARATION

I hereby declare that all the entries made by me in this application are true to the best of my knowledge and belief. If anything is found false at any stage, my candidature may be cancelled without assigning any reason thereof.

Date:

Signature of the Applicant

For In-Service Candidates Only

Endorsement by the Head of the Department/Office or the Principal of the College

Endt. No.

Date:

Forwarded to the Registrar, Satavahana University, Karimnagar (A P)

The applicant, Dr./Sri/Smt/Kum _____, who has submitted this application for the post of _____ in the Satavahana University, Karimnagar, has been working as _____ in the _____ in a temporary / permanent capacity with effect from _____ in the Scale of Pay / Pay Band of Rs._____. He/She is drawing a Basic Pay / Pay of Rs._____ with Grade Pay of Rs._____. His / Her next increment is due on _____.

Further, it is certified that no Disciplinary / Vigilance Case has ever been held or contemplated or is pending against the said applicant. There is no objection for his/her application being considered by the Satavahana University, Karimnagar. And also certify that all the entries made in this application are correct according to his/her service book or records maintained in this office.

Place :

Signature of the Forwarding Authority

Date :

Name :

Designation:

Office Seal :

For Office use only

SCRUTINIZER'S REPORT:

ELIGIBLE :

The applicant possesses qualifications prescribed by the UGC and as notified in the Advertisement. Hence, **ELIGIBLE** to be called for interview.

NOT ELIGIBLE :

The applicant does not possess qualifications as prescribed by the UGC. Hence, **NOT ELIGIBLE** to be called for interview.

The applicant does not have:

- i) 55% of marks in PG Course
- ii) Ph.D.
- iii) NET/SLET/SET
- iv) Does not belong to category to which the post is reserved for
- v)
- vi).....

Head of the Department

Chairperson, Board of Studies

PART B : OTHER RELEVANT INFORMATION

Please give details of any other credential, significant contributions, awards received etc., not mentioned earlier

Sl. No.	Details (mention Year, value etc. where relevant)

LIST OF ENCLOSURES : *Please attach, copies of certificates, sanction orders, papers etc. wherever necessary in Quadruplicate (Four separate Sets)*

Sl. No.		Sl. No.	
1.		11.	
2.		12.	
3.		13.	
4.		14.	
5.		15.	
6.		16.	
7.		17.	
8.		18.	
9.		19.	
10.		20.	
11.		21.	
12.		22.	
13.		23.	
14.		24.	

Signature of the Candidate

SATAVAHANA UNIVERSITY – KARIMNAGAR

SYNOPSIS OF BIO-DATA

(Synopsis of Biodata will be placed before the Selection Committee at the time of interview.

Therefore, the candidate is informed to fill it neatly)

(To be filled in by the candidate in duplicate and to be submitted along with the Application-Form)

*(If handwritten, please use **BLACK PEN** only)*

Paste recent color
pass-port size
photograph here
(Don't Staple)

Advertisement No. & Date :	Post applied for :
Subject :	Reserved for :

Name (in block letters)	
Father's/Husband's Name	
Mother's Name	
Date of Birth & Age (as on last date of receipt of application)	
Place of Birth with District and State	
Gender : (Male/Female)	
Social Status : (SC/ST/BC-A,B,C,D,E/OC with Sub-Caste	
Martial Status : (Married/Unmarried)	
Particulars of Physical Disability, if applicable,	VH / HH / OH :
	Percentage of Disability :

EDUCATIONAL QUALIFICATIONS (SSC onwards) :

Examination / Degree	Name of the Board/University/Institution	Subject	Month & year of passing	Passed Compartmentally OR One-time	Per-centage of Marks	Division/ Class/ GPA

PUBLICATIONS (Specify Number only here and attach a separate sheet containing the list)

	Published			Accepted/ in print			Academic Distinctions (Awards/Honours)
	Journals	Books	Others	Journals	Books	Others	
Research Publications/ Articles							
Books							

TEACHING EXPERIENCE : *

Designation	Name of the University/Institution	Part-time / contract/ permanent	UG/PG/ Others	Period of service		Total No. of years	Specialization
				From	To		

RESEARCH EXPERIENCE : *

Particulars, if any	No. of Years

POST-DOCTORAL RESEARCH EXPERIENCE :

Position held	Name of the College/University/Institution	Period of work		No. of Years
		From	To	

* The period of time taken by candidates to acquire M.Phil. and/or Ph.D. Degree shall not be considered as teaching/research experience to be claimed for appointment to the teaching positions.

SEMINARS / CONFERENCES ATTENDED/PAPERS PRESENTED (Specify Number only here and attach a separate sheet containing the list) :

	Regional Level	National Level	International Level	Total
No. of Seminars/Conferences attended				
No. of Papers presented				

TRAINING PROGRAMMES ATTENDED (Specify Number only here and attach a separate sheet containing the list) :

Particulars of Programmes	No. of Programmes attended
Orientation Course	
Refresher Course	
Workshops	
Others	

PROJECTS CARRIED OUT (Specify Number only here and attach a separate sheet containing the list) :

Particulars of Projects	No. of Projects completed	Funding Agency	No. of Projects Ongoing	Funding Agency
Major Projects				
Minor Projects				

RESEARCH GUIDANCE (Specify Number only here and attach a separate sheet containing the list) :

Particulars of Guidance	No. of Awarded	No. of Submitted	No. of Registered
M.Phil.			
Ph.D.			

COUNTRIES VISITED :

Country visited	Duration of visit		Purpose of visit (other than personal grounds)
	From	to	

PRESENT POSITION :

Post	College/University/Institution	Part-time / contract/ permanent	Present Scale of Pay	Pay	Total Salary per month

API SCORE : (Self-awarded) *

Category – I	
Category – II	
Category - III	

**For Associate Professor, Professor and Deputy Librarian posts only.*

Whether the application is forwarded by the Employer : YES / NO
(If not forwarded, NOC should be submitted at the time of interview)

I hereby declare that all the entries made by me in this application are true to the best of my knowledge and belief. If anything is found false at any stage, my candidature may be cancelled without assigning any reason thereof.

Signature of the Candidate

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Don't leave any column unfilled. If there is no information to fill-in, write "NIL"*

SATAVAHANA UNIVERSITY – KARIMNAGAR
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Paste recent color
pass-port size
photograph here
(Don't Staple)

Advertisement No. & Date :	Post applied for :
Subject :	Reserved for :

Name (in block letters)	
Father's/Husband's Name	
Mother's Name	
Date of Birth & Age (as on last date of receipt of application)	
Place of Birth with District and State	
Gender : (Male/Female)	
Social Status : (SC/ST/BC-A,B,C,D,E/OC with Sub-Caste	
Martial Status : (Married/Unmarried)	
Particulars of Physical Disability, if applicable,	VH / HH / OH :
	Percentage of Disability :

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Research Publications/ Articles							
Books							

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				From	To		

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Particulars, if any	No. of Years

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Category – I	
Category – II	
Category - III	

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ADDRESS SLIP

Address to which communication to be sent (*Capital Letters only*)
(*The University shall not be responsible if the letters are not received at this address*)

Name :	Name :
S/o;D/o;C/o:	S/o;/D/o;C/o;
H. No.	H. No.
Street :	Street :
Village :	Village :
Mandal :	Mandal :
District :	District :
Postal PIN Code :	Postal PIN Code :
Mobile Phone Number :	Mobile Phone Number :

Name :	Name :
S/o;D/o;C/o:	S/o;/D/o;C/o;
H. No.	H. No.
Street :	Street :
Village :	Village :
Mandal :	Mandal :
District :	District :
Postal PIN Code :	Postal PIN Code :
Mobile Phone Number :	Mobile Phone Number :