APPLICATION FOR APPOINTMENT AS ASSISTANT PROFESSOR OF IN PURSUANCE OF THE NOTIFICATION DATED



Paste Passport-size photo here

% of

1	Name (in block letters)	:	
2	Age and Date of Birth	:	
3	Marital Status	:	☐ Single ☐ Married ☐ Other
4	Sex	:	☐ Male ☐ Female ☐ Transgender ☐ Other
5	Religion with Caste/Community	:	
6	If belonging to the Archeparchy of Kottayam, please attach certificate from the Parish Priest		
7	Permanent Home Address	:	
8	Present Address	:	
9	Contact Number	:	
10	E-mail	:	
11	Educational Qualifications: (Begin with S.S.L.C. Attested co	pjie	s of Mark List/ Pass Certificate to be enclosed)

Period of Study Subject for (Specify No. of Institution & University Exam Passed B.A./B.Sc./ B.Com Class/Grade Marks M.A./M.Sc./M Com Years)

12	Academic distinction/rank etc. if any	:							
13	Details regarding eligibility - NET/ PhD	:							
14	Research Experience, if any (Copies to be enclosed)	:							
15	Papers/Books, if any published (Copies to be enclosed)	:							
16	Teaching experience, if any (with institution and period)	:							
17	Name and address of two persons to								
	Who can act as referees	:							
18	Whether applicant is physically-disabled	: □ Yes	□ No						
	(Please attach proof of the same with the ap	oplication form)							
19	Any other information which the applicant might like the selection committee to consider :								
20	Certificate of innovative teaching practices (if any):								
	<u>DECLARATION</u>								
	I hereby declare that the facts stated above are true.								
	Place :								
	Date :			Signature of Applicant					
	Enclosures:								
	<u>NB:</u>								
	 Please enclose a self-addressed stamped envelope for Rs.50. Please remit Rs. 2,000 in favour of the following account, attaching proof of payment with the application: 								

Name: St. Stephens College Uzhavoor

Ac. No.: 14230100037420 IFSC: FDRL0001423

Bank: Federal Bank, Uzhavoor