APPLICATION FOR THE POST OF PROFESSOR OF PRACTICE

Candidate's photograph, duly self-attested

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	lication for the Position				
<u>GE</u>	NERAL INFORMATION	<u>1</u> :			
1.	(i) Name in Full		:		
	(ii) If married, m	aiden name	:		
2.	Father's/Husband's	Name:			
3. (As	Date of Birth : D s recorded in Matriculatio			Year	
4.	Age (as on the last d	late for receivin	g of application	ı):years	monthsdays
5.	Nationality	:			
6.	Marital Status	: Married /Un	married		
7.	Sex	: Male / Fema	ale / TG		
8.	PERMANENT ADDRES				
	District				
9.	ADDRESS FOR CORF			F IIV	
	District	S	tate	PIN.	
	Land-line Phone.:		Mobile	Em	ail

10. EDUCATIONAL QUALIFICATIONS [*] (from Matriculation onwards):

Examination	Board /	Year of		Marks	Class/	Subject(s)	
	University	Passing	Obtained	Out of	% of Marks	Grade	
Matriculation (10 th)							
Higher Secondary / Intermediate (12 th)							
Diploma/ Bachelor's Degree							
Any other Bachelor's Degree							
Master's Degree							
Any other Qualification (if any)							

(Note: [*] Please attach separate sheets if the space is insufficient)

11. PROFESSIONAL EXPERIENCE (Starting from the latest): (*) (#)

Designation	Name of the Organization/	Pay drawn (scale /	Nature of Appointment	Period of Service							
	in case of non- Govt. pl specify.	consolidated)	Regular/ Permanent/ Temp./on contract/ Ad-hoc	From	То	Period					

12. Statu		LS	0	FF	R 8	k D	P	RC	JJI	EC	TS	S U	NΕ	DΕ	RT	AŁ	ΚΕΙ	N (Pro	oje	ct t	itle	, F	un	din	g A	٩ge	enc	;y,	Bu	dge	et,	Cui	rei	nt

13. DETAILS OF CONSULTANCY PROJECTS UNDER Current Status, etc.)	
14. DETAILS OF INDUSTRY INTERNAL PROJECTS U	
15. PROPOSED CONTRIBUTIONS TOWARDS GSV	
13. TROI GCED GONTRIBUTIONO TOWARDO GOV	
16. ADDITIONAL INFORMATION, IF ANY:	
17. I hereby declare that all entries made by me in to the best of my knowledge and belief. I understand t false, incomplete or incorrect, my candidature/appointmenclosed a single pdf file containing attested copies of qualification, experience and the emoluments drawn.	this application are true, complete and correct hat in the event of any information being found nent is liable to be cancelled/terminated. I have
Place	
Date	Signature of the Applicant
(Encl: As above)	