

# DR. BABASAHEB AMBEDKAR OPEN UNIVERSITY

(Established by Government of Gujarat)

#### "Jyotirmay Parisar"

Dr. Babasaheb Ambedkar Open University Marg

Sarkhej - Gandhinagar Highway, Chharodi, Ahmedabad-382 481

Website: www.baou.edu.in

## Advertisement Date:20/06/2021.

	tion forms must be f Regd. A.D. or Spe			riting Filled up appl	ications	
Name of the j	post applied for : <u>A</u>	Assistant	Professor S	anskrit .		Please affix your recent passport size
Online Registration Number			, Processing fees Rs,			color Photograph & sign across
	n No.:				,,	
Charlan Dale	:		·			
1. Name of	applicant					
	(Prefix).	(Name)	(Father's/H	usband's Name)	(Surname)	)
2. Address:	-					
(1) For corres	spondence:	(	2) Permanent	Address		
		,				
	Ph.:					
3. Mobile N	lumber:		, Aadl	har No :		_
4. E-mail:						
5. Mother to	ongue:	Na	tionality:			
6. Date of	Birth://	Age a	s on Last Date	of online Applica	tion : Year _	Month
7. Category	:- (Attach latest re	cognized ce	ertificate for th	e reserved candid	ates)	
SC [ ]	, ST [ ], SEBC	C[], D.A	( Physical Ha	ndicapped) [ ],	EWSs [ ]	, General [ ]

8. Proficiency in language:

	Language	Writing	Reading_	Speaking
(1)	<u>Gujarati</u>			
(2)	<u>Hindi</u>			
(3)	<u>English</u>			
(4)				

## 9. Educational Qualifications: (from S.S.C.)

Examination	Board / University	Year of passing	Marks/Grade, Percentage	Main subject	Remarks
S.S.C.					
H.S.C.					
Graduation:					
Degree :					
1 <sup>st</sup> Year					
2 <sup>nd</sup> Year					
3 <sup>rd</sup> Year					
Post-Graduation					
Degree :					
1 <sup>st</sup> Year					
2 <sup>nd</sup> Year					
M. Phil.					
Ph.D.					
CCC / CCC +					
Others					

10. Details of UGC/CSIR or similarly recognized / NET/ SLET exam, if passed.

Year of Examination passed: \_\_\_\_\_ Reg. No. \_\_\_\_\_

11. Other educational achievements: (Award, Prize, Medal, etc.)

12. Proficiency in Computer (Give details)

Sr. No.	Name of the Institution	Designation	Pay scale and basic pay as on application date, Grade Pay	From Date	To Date	Total Year , Month, Days
As o	n Last Date of Advertis		Experience Y	ears N	Ionths	Days

### 13. Details of experience: (Kindly fill up the table)

(Please use separate sheet if needed)

14. Experience Teaching / Administration as on Date.....:

- a. Graduation Level Year \_\_\_\_\_ Month \_\_\_\_\_
- b. Post-graduation Level Year \_\_\_\_\_ Month \_\_\_\_\_
- c. Research/Extension Year \_\_\_\_\_ Month \_\_\_\_\_
- d. M.Phil./Ph.D. guidance Year \_\_\_\_\_ Month \_\_\_\_\_

#### 15. Details of Publication and Research work:

S. No.	Title	Year of publication	Publisher	ISBN / ISSN No.	Author/Co author

(Please use separate sheet if needed)

16. Details of Seminar / Workshop / Orientation / Refresher Course:

S. No.	Name of Institution	Programme	Duration	Whether paper submitted	Category State/ National/ International

(Please use separate sheet if needed)

17. Please give name, address and contact number of two persons for reference.

(1)	 (2)	

18. Details of attachments: (Attach self-attested Xerox copies)

- (1) Printed copy of Online Application Submitted (Compulsory)
- (2) Processing Fees Original Challan Copy
- (3) Proof of Date of Birth. (Compulsory)
- (4) Latest Certificate of ST/Handicapped/

Certificate No.\_\_\_\_\_ Date of Issue of Certificate \_\_\_\_\_

- (5) Proofs of Educational qualifications
- (6) Experience certificates If your teaching experience is in a Self Finance Institution, please submit copy of approval of your appointment / profile of the concerned University.
- (7) NET / SLET examination pass certificate

- (8) Details of guidance to M.Phil./Ph.D. category students.
- (9) M.Phil. / Ph.D., Thesis, Titles of Publications, as per UGC Regulations 2009 Certificate
- (10) Details of Seminars / Workshops / Orientation programme / Refresher Course.
- (11) For position of Associate Professor: Mandatory requirement API Score sheet as per latest UGC norms.
- (12) Others.

#### CERTIFICATE

I hereby declare that the information provided by me in the application from is true according to my knowledge and belief. I have not given any wrong or incomplete information. I know that in case of any false information found on my part after my appointment, my service is liable to be terminated without any notice.

I affirm that there is no criminal case/civil case or warrant or departmental proceedings pending against me in any court of law. If any departmental proceedings or civil or criminal case found against me I will be responsible for that, in that case, I know that, my service is liable to be terminated without any notice.

I have read the instructions given along with the application form and understood the same and I am abide by it.

Date \_\_\_\_\_

Place \_\_\_\_\_

(Signature of the applicant)

#### (For use of Applicants in Employment)

Forwarded with the remarks that the above statements made by the applicant are correct to the best of my knowledge and belief, and this institution / organization has no objection to the candidature of the applicant being considered for the post applied for.

Date: \_\_\_\_\_\_
Place: \_\_\_\_\_

(Signature)		-
Head of the	Institution	
Designation		
Address		-

Mobile No. : \_\_\_\_\_