

# **UNIVERSITY**

(A Central University Established by an Act of Parliament No.35 of 1989)

## HEADQUARTERS - LUMAMI ZUNHABOTO DISTRICT-798 627 NAGALAND, INDIA

#### **APPLICATION FORM** (For the post of Assistant Professor)

Please fill up separate form for each post

Post applied for Department of		Advertisement No Post No		Affix recent passport size photograph
Applied under category UR/SC/ST/EWS/OBC/PW (if PWD indicate category of disability)	D			
Particulars of remittance:			L	
Amount Rs(Rupees			_) only	
Name of Bank with address				
Date of Deposit				
1. Name of applicant ( Block Letters)	:			_
2. Father's/ Husband's Name	:			_
3. Date of Birth (Please attach attested copy)	:			_
4. (a) Present Address for correspondence	: (b) Permanen			
	:			-
				-
Mobile No	Mobile No			
E mail:				

E-mail: \_

5.	(a) Nationality	(b) State
	(c) District	(d) Place of Birth
	(e) Sex:Male/Female	(f) Marital Status
	(g) Religion	(h) Category

	Name of course	Name of the Board/ University	Year passed	Div isi on	CGPA (if grading is applicable)	% of Marks (pl. indicate equivalent to CGPA also)	Subjects studied	Sl. No. of proof of enclosure
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
10th Class / equivalent								
10+2/Higher Secondary equivalent					<u> </u>			
Bachelor's degree								
Master's degree								
M. Phil.				Title	:			
Ph. D./D.Phil.				Title:				
NET/ SLET/SET f lectureship, if a		Subject			Rol	No.	Year	_
Any other exam	is passed							_

7. Details of	7. Details of Post doctoral experience							
Agency	Host Institution	From	То	Duration	enclosure			
Total experi	ence years	Months	Total					

\* Add separate sheet if required, to be annexed at relevant Sl. No.

#### 8. RESEARCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS

## (A) Published Papers in Journals

SI.	Title	Journal	ISSN/	Impact	Whether	No. of	Whether you	S. No. of proof
No.	with		ISBN	factor	Peer	co-	are the first or	of enclosure
	Page		No.		reviewed.	authors	corresponding	
	nos.				Impact		author	
					factor, if			
					any			

8. (B) Articles/ Chapters published in Books

SI.	Title with	Book Title,	ISSN/	Whether	No. of co-	Whether you	S. No. of
No.	Page nos.	editor &	ISBN	Peer	authors	are the first or	proof of
		publisher	No.	reviewed.		corresponding	enclosure
						author	

#### 8. (C) Full papers in Conference Proceedings

SI.	Title with	Details of	ISSN/	No. of co-	Whether you	Sl. No. of
No.	Page nos.	Conference	ISBN No.	authors	are the main	proof of
		Publication			author	enclosure

#### 8. (D) Books Published as author or as editor

SI.	Title with	Type of Book	Publisher &	Whether	No. of	Whether you	Sl. No. of
No.	Page nos.	& Authorship	ISSN/ ISBN	Peer	co-	are the main	proof of
			No.	reviewed.	authors	author	enclosure

## 8. (E) Ongoing Projects/ Consultancies

SI. No.	Title	Agency	Period	Grant/ Amount Mobilized (Rs lakh)	SI. No. of proof of enclosure

#### 8. (F) Projects Outcome/Outputs

SI.	Title	Agency	Period	Grant/	Whether policy	Sl. No. of
No.		(International/National/State		Amount	document/	proof of
		Govt./Local Bodies)		Mobilized	patent as	enclosure
				(Rs lakh)	outcome	

8. (G) Paper presented in Conferences, Seminars, Workshops, Symposia (*mention only upto a maximum of Ten* [10])

SI.	Title of the	Title of	Organized	Type: International/	Sl. No. of
No.	Paper	Conference /	by	National/State/	proof of
	Presented	Seminar		Regional/College or	enclosure
				University level	

9. TEACHING/PROFESSIONAL/RESEARCH EMPLOYMENT (Give particulars in descending order starting with the present post):

Employer/Agency	Status of Institute/University*	Post held	Scale of Pay	Basic Pay		riod of ment/project	Nature of duties/work
	institute/ Oniversity	neia	1 dy	1 dy	From	То	duties/ work

\*Government/Quasi Government/Autonomous/Private

\* Attach documentary proof.

10. Name, designation and address of two referees (not related to the candidate) :

(i) \_\_\_\_\_\_

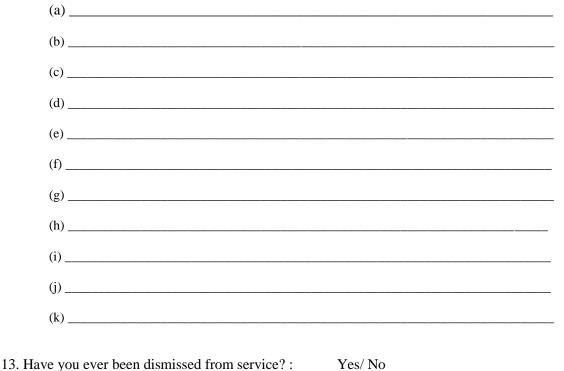
(ii) \_\_\_\_\_

Email:	Email:
Mobile/Phone No	Mobile/Phone No



11. Any other relevant information, if not given above:

#### 12. Details of enclosures:



(If Yes, give the details)

Yes/ No :\_\_\_\_\_

## **14. Declaration by the candidate**:

l,	son/ daughter of	hereby declare			
that all the statements and entries made in this application are true, complete and correct to the best of my					
knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected					
before or after the Selection Committee and Executive Council meetings, my candidature/ appointment may					
be cancelled by the University.					
I have never been convicted or contemplated for any unlawful activity. Signature of the Applicant					
		*Name as signed (in BLOCK LETTER)			
Date : *Application not signed by the candidate is liable to be rejected					

15. Forwarding from the present employer:

a) In case of in-service candidates in Government/ Semi-Government organizations/ Public Sector Undertakings / Autonomous Organizations, the endorsement form must be signed by the employer.

b) In case of in-service candidates from Private Sector, acceptance of resignation and relieving letter from the employer must be submitted at the time of joining.

Forwarded to the Registrar, Nagaland University, Lumami 798627, Nagaland

The applicant Dr./Mr./Mrs/Ms.	who has submitted this
application for the post of	in the Nagaland University, has been in
employment in a te	mporary/ contract/ permanent capacity with effect
from in the Scale of Pay of F	s He/She is drawing a
basic 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 Nagaland University, and in the event of selection He/She will be relieved to join Nagaland University as per rules.

#### Signature of the forwarding officer

Name: \_\_\_\_\_

Designation:

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

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