BIJU PATNAIK UNIVERSITY OF TECHNOLOGY, ODISHA ROURKELA

APPLICATION FORM FOR REGULAR FACULTY POSITION

Post applied for		(Advt No		, dated 26.02.	2014.)	
(enclose the caste certificate/ Medical certificate for claim of reservation) 1. Name in Full : (in block letters) (as indicated in secondary school certificate) 2. Date of Birth : (DD/MM/YY) 3. Nationality :	Post a	applied forDisciplir	ne	Co	ollege	
(in block letters) (as indicated in secondary school certificate) 2. Date of Birth :					_ Date	_ Amount
2. Date of Birth (DD/MM/YY) 3. Nationality 4. Category (General/ SC/ST) 5. Sex (Male/ Female) 6. Marital Status (Married / Unmarried) 7. Father's Name/ Husband's Name 8. Address for Correspondence E mail: Landline: Fax: 9. Permanent Address 10. Academic Qualifications	1.	Name in Full	:			
(DD/MM/YY) 3. Nationality : 4. Category (General/ SC/ST) : 5. Sex (Male/ Female) : 6. Marital Status (Married / Unmarried) : 7. Father's Name/ Husband's Name : 8. Address for Correspondence : E mail : Mobile: Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :		(in block letters) (as indicated in second	dary	school certificate)		
4. Category (General/ SC/ST) : 5. Sex (Male/ Female) : 6. Marital Status (Married / Unmarried) : 7. Father's Name/ Husband's Name : 8. Address for Correspondence : E mail : Mobile: Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :	2.		:			
5. Sex (Male/ Female) : 6. Marital Status (Married / Unmarried) : 7. Father's Name/ Husband's Name : 8. Address for Correspondence : E mail : Mobile: Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :	3.	Nationality	:			
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8. Address for Correspondence : E mail : Mobile: Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :	6.	Marital Status (Married / Unmarried)	:			
E mail : Mobile: Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :	7.	Father's Name/ Husband's Name	:			
Landline : Fax: 9. Permanent Address : 10. Academic Qualifications :	8.	Address for Correspondence	:			
9. Permanent Address : 10. Academic Qualifications :				E mail :	Mobile:	
10. Academic Qualifications :				Landline:	Fax:	
	9.	Permanent Address	:			
	10.		:			

SI	Exam	University/	Month/		Subjects	Specialization	% of	Division	Rank/
No	passed	Board/	Year	of			Marks/		Position
		Institution	passing				CGPA*		
					In which	If any			
					degree				
					awarded				
1									
2									
3									

- Research Experience 11.
 - Science & Humanities / Engineering Discipline : (i)
 - Field of Specialization: (ii)
 - Length of Experience : (iii)
- Professional Training 12.

Organization	Per	Training Area	
	From	То	

^{*} Please specify the percentage of marks upto two decimal place * In case of CGPA / CPI, please give marks in percentage along with the conversion formula

13.	Employment Records	
۱J.	Employment Necords	

Name	&	Period o	of service	Designation	Scale	of	Work	Reason of	Total period
address	of	From	To		Pay		Description	leaving	of
employer/ i	nst.								employment

14. Research Papers in Journals

International Journals	National Journals
No. of Papers	No of Papers

^{*} The details to be attached in a separate sheet

15. Research Papers presented in Conference/ Seminar :

No	Conference/ Seminar	Year
1		
2		

^{*} The details to be attached in a separate sheet

16. Patents filed (separately for India & Overseas)

No	Details	Year
1		
2		

17. Research Projects Undertaken

SI	Name of the Project	Sponsoring Agency	Name of Co- investigator, if any	Amount sanctioned

18. Research Guidance

SI	Name of the Book/ Title	M.Tech/ Ph.D	Year

19. Awards / Honours received

	No. of Awards/ Honours	Year	Detail
International			
National			
State			
Professional bodies			
Any other			

20. Publications:

	No.	Title & Year
Books		
Book Chapter (s)		
Monograph		

	-d-			Т	
Repo	orts Affiliation to Profession	onal Society :			
۷۱.	7 milation to 1 forestional coolety .				
	Academic Fellowship (i)				
		(ii)			
	Professional Body	(i)			
	Membership				
		(ii)			
22.	Other Academic Activities (Curricular/ co-curricula/ Examination/ Hostel/ Sports/ NSS/ NCC/ Scouts etc) :				
SI.	Name of the activities		Date of activities held		Remarks
No. 1					
2					_
23. 24.	Minimum joining time require (if selected): Have you been interviewed by any University during past year? give detail				
SI. No.	Name of the post & d	liscipline		Date of interview	Result/ remarks
1					
3					
25.	Any other information in support of your candidature :				
26.	Name of the two referees : Address/ Tel/ Email				
27.	Declaration :				
	I declare that the for	egoing information is	correct	to the best of my know	vledge and belief and
nothi	ng has been conceale	d / distorted. If any ti	me, I aı	m found to have cond	ealed / distorted any
mate	rial information, my ap	pointment shall be lial	ole to te	ermination without noti	ce. I will, if and wher
required, take up duty in the discharge of Government assignment anywhere in India.					
Place Date				Signature of	Candidate