



U. P. RAJARSHI TANDON OPEN UNIVERSITY, PRAYAGRAJ

(A State Open University of Uttar Pradesh, Established by U.P. Legislature Act. 10 of 1999)

APPLICATION FORM FOR ASSISTANT PROFESSOR (CONTRACTUAL)

Advertisement No.: ----- Dated: -----	PASTE RECENT PASSPORT SIZE PHOTOGRAPH WITH CROSS SIGNATURE			
Post Applied For :-----Subject/School :-----				
Specialization of the Post (if any as Advertisement):-----				
For office use only				
Date of Receipt : / /2023				
Name & Signature of Receiver:-----				
FEE PAYMENT DETAILS				
Demand Draft No./RTGS No.	Bank Name	Branch Name	Date	Amount
				Rs.

PART-A GENERAL AND ACADEMIC INFORMATION

Name (In Block Letters)							
Father's Name							
Mother's Name							
Date of Birth				Age on last date of advertisement:			
Place of Birth		Village/City		District	State	Country	Pin Code
Nationality				Gender (Male/Female/ Transgender)			
Category		Sub Category (Encl. No.)		E.W.S. (Encl. No.)		Marital Status	Married Unmarried
Religion				Aadhaar No.			
Differently Abled PH (Divyang)			Yes/No	If Yes Please mention the type of disability		Percentage of Disability	
						%	Encl. No.
Permanent Address		Village/City	District	State	Country	Pin Code	
Correspondence Address		Village/City	District	State	Country	Pin Code	
Contact No.				E-mail ID			

Academic Qualifications

Examination	Name of the Course	Name of the Board/ University	Year of Passing	Percentage of marks obtained	Division/ Grade	Subject	Encl. No.
10 th Class/ Equivalent							
10+2/ Hr. Secondary/ Equivalent							
Bachelor's Degree							
Master's Degree							
Any others if any							

Research Degree(s)

Degree	Subject	Title	Date of Award	University	Encl. No.
M.Phil.					
Ph.D./D.Phil.					
D.Sc./D.Litt.					
<i>Note : Whether Ph.D./D.Phil. awarded as per UGC Regulation-2009, 2016 (if yes, Please give documentary proof)</i>				Yes/No:	

Particulars of NET/JRF/SLET/GATE etc.

Name of the Test	Name of the Test conducting body	Month and Year	Roll No.	Subject	Score where applicable	Encl. No.

Field of Specialization under the Subject/Discipline:

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Present Employment Detail (If Employed)

Department

Subject

Organization Name	Designation	Date of Appointment	Present Status	Pay Scale/ Level	Basic Pay	Grass Salary	Encl. No.

Designation	Nature of the Post	Salary with Grade/AGP	Name and Address of Employer	Level (UG/PG)	Period of Experience			Encl. No.
					From	To	Duration	

PG level:Years, UG level.....Years

Teaching Experience

Research/ Industry Experiences (Post-doctoral Fellow, Research Associate, Research Scientist etc.

Organization Name	Position Held	Date of Appointment	Period of Experience			Encl. No.
			From	To	Duration	

Orientation/Refresher Course, Training Courses, Teaching-Learning-Evaluation Technology Programmes, Faculty Development Programmes (not less than one-week duration) attended

S. No.	Name of the Course	University/ Organizing Institute	Sponsoring Agency, if any	Period of Course			Encl. No.
				From	To	Duration	

PART-B

**TEACHING, EXAMINATION, PROFESSIONAL DEVELOPMENT,
ADMINISTRATION,
CO-CURRICULAR AND EXTENSION ACTIVITIES**

(a) Teaching

[illegible]

Administration, Examination, Professional Development, Co-Curricular and Extension Activities

[illegible]

PART-C

ACADEMIC/RESEARCH SCORE

(As per UGC Regulation-2018, Page No. 105, published in the Gazette of India, dated

18.07.2018)

Category 1 : RESEARCH PAPERS IN JOURNALS

[illegible]

2. (a) (i) Books Authored

[illegible]

2. (a) (ii) Edited Books

[illegible]

2. (a) (iii) Chapters in Edited Books

[illegible]

2. (b) (i) Chapters in Translation works in Indian and Foreign Languages Published

[illegible]

2. (b) (ii) Books in Translation works in Indian and Foreign Languages Published

[illegible]

3. (a) Development of Innovative Pedagogy

3. (b) Design of new Curricula and Courses

3. (c) MOOCs

3. (d) e-Content

CATEGORY 4 : RESEARCH GUIDANCE, PROJECT CONSULTANCY

4. (a) Research Guidance

4. (b) Research Projects Completed

4. (c) Research Projects Ongoing

[illegible]

4. (d) Research Project Consultancy

S. No.	Title of Research Project	Funding Agency	Date of Sanction	Grant/ Amount Mobilized	Project Type	Role	Status	API Score	Encl. No.

5. PATENTS/ POLICY/ DOCUMENT AND AWARD/FELLOWSHIP**5. (a) Patents**

S. No.	Title	Level	Date of Filling	Status	Patent File No.	API Score	Encl. No.

5. (b) Policy Document

S. No.	Title	Funding Agency	Submission/ Approval Date	Name of the Bodies	Level of Policy	API Score	Encl. No.

5. (c) Awards/Fellowships

S. No.	Name of the Awards/Fellowships	Date of Award	Awarding Body/ Organization	Level (International/ National/ State)	API Score	Encl. No.

CATEGORY 6. INVITED LECTURES / RESOURCE PERSON / PAPERS PRESENTATION IN SEMINARS/ CONFERENCES / FULL PAPER IN CONFERENCE PROCEEDINGS

(Papers Presented in Seminars / Conferences and also published as Full Paper In Conference Proceedings will be counted only once)

S. No.	Title of Lecture/Paper/Session	Name of Programme with Date	Organizing Body/Agency	Level International/ National/state	Within Country or Abroad	API Score	Encl. No.

THE MOST SIGNIFICANT FIVE RESEARCH PUBLICATION

S. No.	Title of paper with Page nos.	Journal/Book Name Year	ISSN/ ISBN No.	No. of co-authors	Whether main author	API Score	Encl. No.
1.							
2.							
3.							

PART-D

OTHER RELEVANT INFORMATION

1. (a) Are you willing to accept the minimum initial salary of the grade/level? If not, state the reasons for a claiming higher starting pay.

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- 1. (b) Minimum basic salary acceptable**

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2. (a) Have there been any breaks in your academic/service career? If yes, please specify.

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3. (a) Have you been punished during your service or convicted by a court of Law? If yes, give name of the court, case number and offence.

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- 3 (b) Do you have any case pending against you in any court of Law? If yes, give name of the court, case number and offence.

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- #### 4. Membership of Academic/Professional Bodies

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5. Details of any other credential, significant contributions, awards received etc. not mentioned earlier.

[illegible]

6. Reference of Persons with or under whom candidate has worked, or who have intimate knowledge of his/her work

S. No	Name	Address	E-mail	Mobile No.
1.				
2.				

7. Any other relevant information, if not given above

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SUMMARY OF THE ACADEMIC/RESEARCH SCORES

S. N.	Academic/Research Activity	Total Research Score claimed by the candidate	<i>For office use only</i> Research Score verified
1.	Research Papers in Peer- Reviewed or UGC listed Journals		
2.	Publications other than Journals (a) Books Authored (b) Edited Book (c) Chapters in Edited Book (d) Translation Work (Book/Chapter)		
3.	Creation of ICT mediated teaching learning pedagogy and content and development of new and innovative courses and curricula (a) Development of Innovative Pedagogy (b) Design of new Curricula and Courses (c) MOOCs (d) E-Content		
4.	Research Related (a) Research Guidance (b) Research Projects Completed (c) Research Projects Ongoing (d) Research Project Consultancy		
5. (a & c)	Patents and Award/Fellowship Related (a) Patents (c) Awards/Fellowships		
5. (b)	*Policy Document		
6.	*Invited Lectures/Resource Person/ Papers Presentation in Seminars/Conferences/Full Paper in Conference		

	Proceedings (Papers Presented in Seminars/Conferences and also published as Full Paper in Conference Proceedings will be counted only once)		
Total Score			
Final Score (After applying 30% capping in 5(b) & 6)			

(***Note:** *For the purpose of calculating research score of the teacher, the combined research score from the categories of 5 (b) Policy Document and 6 Invited Lectures/Resource Person/Papers Presentation shall have an upper capping of 30% of the total research score of the teacher concerned.)

LIST OF ENCLOSURES: (please attach self attested copies of certificates, sanction orders, papers etc. wherever necessary)

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|-----|-----|-----|
| 1. | 11. | 21. |
| 2. | 12. | 22. |
| 3. | 13. | 23. |
| 4. | 14. | 24. |
| 5. | 15. | 25. |
| 6. | 16. | 26. |
| 7. | 17. | 27. |
| 8. | 18. | 28. |
| 9. | 19. | 29. |
| 10. | 20. | 30. |

DECLARATION

I,.....S/o or D/o.....
hereby declare that the information given above by me are complete, correct and authentic. In case of concealment/suppression detected, of any facts, my application is liable to be rejected/employment terminated, as the case may be, without any notice or compensation.

Date:
Applicant
Place:

Name & Signature of the

RECOMMENDATION OF EMPLOYER, IF IN SERVICE

Dr./Shri/Smt./Km.....is
working as in this
institution. His/Her application form is hereby forwarded. In case he/she is appointed for, I
would have no objection to relieve him/her to join the said post.

Place:

Signature of the head of the institution

Date :

Full name & Designation with seal