## ATAL BIHARI VAJPAYEE -

**INDIAN INSTITUTE OF INFORMATION TECHNOLOGY & MANAGEMENT, GWALIOR**

(An Autonomous Institute of Govt. of India)

***APPLICATION FOR FACULTY POSITION (ASSISTANT PROFEESOR / ASSOCIATE PROFESSOR / PROFESSOR)***

Advt. No………………………………………………………………………Date………………….…..

Photograph

1 Post Applied for :

1. Name :

# PART A: DETAILS OF APPLICANT

1. Father’s/ Mother’s/ Husband’s Name:
2. Date of Birth (DD/MM/YYYY):
3. Category: SC ST PwD OBC GEN

5.1 Type of PwD Category:……. (OH/HH/VH) 5.2) % of Disability---------- (Enclose Photocopy of self-attested certificate)

6.1. Contact Details: (a)Address :

(b) Email :

1. Phone :

PIN:

1. Mobile : (d) Fax: \_ \_ \_ \_
2. Educational Qualifications (in chronological order : starting from the current to the first)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Degree/Certificate** | **Name of Institution** | **Passing Year** | **Grade / Division** | **Marks/CGPA** | **Remarks** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. Areas of specialization:
2. Teaching/Research/Work Experience:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sn** | **Designation** | **Scale and pay (specify revised or old)** | **Name and Address of the Organization** | **From** | **To** | **Years** | **Nature of work and responsibilities** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. Institutional /Administrative Experience:
2. Teaching/ Research Experience: (in chronological order)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Designation** | **Organization** | **From** | **To** | **Years** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |

1. A short write up on why I consider myself suitable and my vision for the post applied for within 200 words.

## \_

1. (A) Publications

Total Number

|  |  |
| --- | --- |
| International Journal |  |
| National Journal |  |
| International Conference |  |
| National Conference |  |

## Details

1. **1) International Journals**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.No. | Author(s) | Title of Paper | Journal Name | Vol, Issue | Year | Impact factor of Journal | Remarks :SCI Journal/Scopus listed etc. |
| 1. |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |

* 1. **2) National Journals**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.No. | Author(s) | Title of Paper | Journal Name | Vol, Issue | Year | Impact factor of Journal | Remarks :SCI Journal/Scopus listed etc. |
| 1. |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |

**A. 3) International Conference**

In the format:

Author name 1, Author Name …., Year, Name of Conference, Publisher, Place, and Page Nos.

## A. 4) National Conference

In the format: Author name 1, Author Name …., Year, Name of Conference, Publisher, Place, Page Nos.

## 13. (B) Projects Completed /developed

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S.  No. | Title of the Project | Funding agency | Amount | Duration & Date (from ---  to..) | Status Completed  / ongoing | Role :  Principal Investigator / Co-investigator |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |

**13. C) Thesis supervised**

C.1) Ph D Thesis

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Title of the Thesis | Name of student | Year | Status Completed/ong oing | Names of Other supervisor (if any) |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |

## C. 2) Master’s Thesis

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Title of the Thesis | Name of student | Year | Status Completed / ongoing | Names of Other supervisor (if any) |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

1. **D) Consultancy assignments**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S. No. | Title of the Project | Client | Amount | Duration | Status Completed/ongoing | Role : Principal  Consultant//Co- consultant |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |

1. **Other Academic Activity (Continuing education, Training programmes etc.)**

|  |  |  |  |
| --- | --- | --- | --- |
| **S No** | **Activity Description** | **Duration (Period)** | **Remarks: Role** |
|  |  |  |  |
|  |  |  |  |

1. **Any Other Activity: Significant Experiments developed, Computational Design Projects, Books written, collaborative teaching/research experience, International collaboration etc. (describe briefly each of these)**

**1.**

**2.**

**3.**

1. **Awards/Honors/fellowships: 1.**

**2.**

**3.**

**4.**

1. **Name & Addresses of three (3) Referee’s who knows your work**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Referee 1 | Referee 2 | Referee 3 |
| Name |  |  |  |
| Designation |  |  |  |
| Address |  |  |  |
| Phone Office Residence Mobile |  |  |  |
| Email |  |  |  |

**PART-B: PRESENT EMPLOYMENT**

Additional details about present employment (If any)

Present Pay scale :

(Central Govt/State Govt/PSU/Private Enterprise/Others (Specify)

If pay scale has been revised recently state the date of revision and also the pre-revised scale

|  |  |  |  |
| --- | --- | --- | --- |
|  | Pre-revised | Revised | Remarks |
| Basic pay |  |  |  |
| Dearness allowance |  |  |  |
| Other allowance (Please specify) |  |  |  |

Any Other information you wish to furnish (Extra Sheets may be attached as enclosure)

## PART-C: DECLARATION

**Declaration by the Applicant**

I hereby declare that all the particulars stated in the application & enclosures, are true to the best of my Knowledge and belief. At any time I am found to have concealed/distorted any material information, my candidature/appointment shall be summarily terminated without any notice/compensation.

I also understand that I fulfill the eligibility requirement of 4 tier flexible cadre structure (***MHRD Notification no FNo. 27-11/2011TS.1 dated 23rd April,2014*)**

Place:

Date: \_

## Signature of Applicant

**PART-D: FORWARDING AUTHORITY/EMPLOYER’S ENDORSEMENT**

This is to certify that Mr/Ms/Dr……………………………………. is working as **…………………………** from ----------------------- on regular/ contract/tenure appointment in our department/organization. We have no objection for his/her applying to ABV-IIITM Gwalior.

It is further certified that no vigilance case enquiry is pending against him/her. In case of his/her selection, he/she will be relived on deputation/direct recruitment.

Date

## Place Signature of the Employer withy Office Seal