

# MAHARAJA KRISHNAKUMARSINHJI BHAVNAGAR UNIVERSITY

## Application Form For Recognition As Post-Graduate - Teacher Under Ordinance - 12

Personal Details						
1	Name in Full Beginning with surname					
2	Date of Birth (as per School Leaving Certificate)					
3	Gender					
4	Nationality					
5	Category					
6	Permanent Address					
	City					
	Taluka					
	District					
7	Office Address					
8	Date of Joining					
9	Designation					
10	Pay Scale					
11	Date of Retirement					
Contact Information						
12	Landline, Mobile & E-mail ID Information					
	Office					
	Residence					
	Mobile					
E-Mail Id						
Academic Information						
13	Education					
	Degree	University	Class	Subject Principal	Year	Whether Obtained By Papers/Research Or For Published Work
	U.G. _____					
	P.G. _____					
	M.Phil. _____					
	Ph.D. _____					
	Other _____					

Research Information						
14	Experience of Research Work of a researcher working in Recognized Institution / College / Department					
	<b>Name of the College Institute / Dept.</b>	<b>No's of year of Research Experiences</b>	<b>No's of Research Articles of published</b>	<b>No's of Monographs published if any in the subject</b>		
<b>Attach a separate sheet, if required.</b>						
Experience Details						
15	Teaching Experience at Degree Course					
	<b>Designation</b>	<b>Total Years of Experience</b>	<b>Period (Date to Date)</b>	<b>Standard</b>	<b>Subject(s) taught</b>	<b>Name of College / Inst./ Dept.</b>
<b>Attach a separate sheet, if required.</b>						
<b>(N.B.A. Certified copy mark sheet of Degree certificate for degree should be attached.)</b>						
21	Subject(s) for which recognition is sought					
22	Faculty for which recognition is sought					
	Signature of Applicant			Signature of the Head of the institution		

Date :

Place :

### **Certificate of the Principals of the College/Head of the Institution of Department concerned**

- (1) I hereby certified that \_\_\_\_\_ teacher in this college / Institution / Department holding the appointment of lecturer/ Professor \_\_\_\_\_ and his her appointment as such as been approved by the University latter No. \_\_\_\_\_ dated \_\_\_\_\_
- (2) The Above information given by the teacher concerned id correct to the best of my knowledge and belief and he/ she is eligible for recognition as Post-Graduate teacher under-O.12.

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

**Signature of the principal or the Head of the Department of Department**

Enclosure

1.	Leaving Certificate	
2.	U.G. Mark sheet	
3.	U.G. Degree Certificate	
4.	P.G. Mark sheet	
5.	P.G. Degree Certificate	
6.	M.Phil. Mark sheet	
7.	M.Phil. Degree Certificate	
8.	Ph.D. Notification	
9.	Ph.D. Degree Certificate	
10.	Research Paper's with Index	
11.	Experience Certificate	
12.	Work load Certificate	
13.	Appointment Letter	
14.	Pay Scale Certificate / Pay Sleep	