

# APPLICATION FOR THE POST –

Form No. \_\_\_\_\_

Director / Prof. / Asso. Prof. / Asst. Prof. / Librarian

Subjects for Teaching (In Capital letters) : \_\_\_\_\_

To,

The Director

Sadhu Vaswani Institute of Management Studies for Girls

6, Koregoan Road, Pune – 411001.

Sir/ Madam,

I wish to apply for the post mentioned above –

I) Full Name ( In Roman Script) : \_\_\_\_\_  
(In Capital letters) (Surname) (Name) (Middle Name)

In Devnagari Script: \_\_\_\_\_

# Change in Name, ( if any ) \_\_\_\_\_

Mother's Name: \_\_\_\_\_

II) # 1) Permanent Address : \_\_\_\_\_

Tal. : \_\_\_\_\_ Dist. : \_\_\_\_\_ State : \_\_\_\_\_ PIN: \_\_\_\_\_

# 2) Temporary Address : \_\_\_\_\_

Tal. : \_\_\_\_\_ Dist. : \_\_\_\_\_ State : \_\_\_\_\_ PIN: \_\_\_\_\_

3) Mobile No. : 1) \_\_\_\_\_ 2) \_\_\_\_\_ Land line No.: \_\_\_\_\_

E-Mail ID : \_\_\_\_\_

III) Date of Birth : \_\_\_\_\_ Age : \_\_\_\_\_ Yrs.

IV) Gender : Male /Female Marital Status : Married / Unmarried

V) # Religion: \_\_\_\_\_ Caste : \_\_\_\_\_ Sub. Caste : \_\_\_\_\_

VI) Mother Tongue : \_\_\_\_\_ Languages Known : \_\_\_\_\_

VII) References : 1) Name: \_\_\_\_\_ M. \_\_\_\_\_

2) Name : \_\_\_\_\_ M. \_\_\_\_\_

VIII) Anything else that you would like to say about yourself : \_\_\_\_\_

# All Documents / Certificates should be Submitted in two attested copies along with the application

IX) Qualifications :

Examination / Degree	Month & Year of Exam	Name of University / Board	% of Marks	Special Subjects	School / College from which passed
SSC					
HSC					
Graduation in (_____)					
Post Graduation in (_____)					
Diploma / Certificate (_____)					
Any Other qualifications (_____)					

X) Experience :

Name of the Organisation / Institute	Designation	Work Handled	No. of Year/s of Service

Total Work Experience in Year/s: \_\_\_\_\_

I declared that the information given by me in these columns and in the attached sheets is correct to the best of my knowledge.

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

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

Signature of the Candidate

# All Documents / Certificates should be Submitted in two attested copies along with the application

Sr. No.	PARTICULARS	DETAILS
1	TEACHING EXPERIENCE IN YEAR/S	
2	RESEARCH EXPERIENCE IN YEAR/S	
3	INDUSTRY EXPERIENCE IN YEAR/S	
4	TOTAL EXPERIENCE IN YEAR/S	
5	NO. OF PUBLICATION IN NATIONAL JOURNALS	
6	NO. OF PAPERS IN NATIONAL CONFERENCE	
7	PATENTS HELD	
8	NO. OF PROJECTS GUIDED	
9	NO. OF DOCTORATE STUDENTS GUIDED	
10	NO. OF PAPER IN INTERNATIONAL JOURNALS	
11	NO. OF PAPER IN INTERNATIONAL CONFERENCE	
12	NO. OF BOOKS PUBLISHED	
13	FY / GEN. MANAGEMENT / OTHER SUBJECTS	
14	SY / GEN. MANAGEMENT / OTHER SUBJECTS	
15	WOULD YOU LIKE TO WORK AS EXPERT MEMBER ON VARIOUS COMMITTEES OF AICTE?	
16	HAVE YOU EVER APPLIED TO AICTE FOR ANY GRANTS / ASSISTANCE?	
17	ALL UNIVERSITY APPROVAL LETTERS NO. AND DATE ( WITH SUPPORTING DOCUMENTS)	

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

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

Signature of the Candidate