

APPLICATION PROFORMA

Page – 01

Post applied		Subject			
FULL NAME In Capital letters					Sex M / F
POSTAL ADDRESS	City : _____ Dist. : _____ Pin code : _____				
CONTACT DETAILS	Phone : _____ Cell No. (With STD code) e-mail : _____				
BIRTH DATE (Attach SLC)	in Numerical : _____ / _____ / 19 Completed Age (on last day of applications) : Years - _____ Months - _____ Days - _____				
Religion :		Category : SC / ST / VJNT / SBC / OBC / OPEN		Cast :	
QUALIFICATIONS (Attach all relevant Certificates)					
COURSE	Name of the Course	Board / University	Passing Year	% of Marks	Class / Grade
HSC					
UG					
PG (Speciality)					
Super Speciality (if any)					
PhD / PG Dip. (if any)					
OTHER (Please Specify)					
OTHER (Please Specify)					

EXPERIENCE (Attach all relevant Certificates & Approvals. Starting form Present / Latest Job at Sr. No. 01)								
Sr, No ,	NAME of the COLLEGE	Designatio n / Post held	Period of Experience			MUHS Approval Letter No. & Date		
			From	To	Duration			
01								
02								
03								
04								
05								
Sr. No,	Research Activities / Paper Publications (State Briefly. Attach Separate list & details, if required.)					Tick the appropriate box		
						State Level	National Level	Inter-Natl Level
01								
02								
03								
04								
05								
Registration		State Council : _____ Other : _____						
MUHS Activities (State Briefly)								
Other Activities (State Briefly)								

1. Attach attested copies of all necessary documents. Please attach separate sheet, if required.
2. Attach attested copy of Caste Certificate & Caste Validity Certificate, if applying for Reserved Posts.
3. Attach the copy of Non – Creamy Layer Certificate for current Financial Year, wherever applicable.
4. In – service candidates shall apply through proper channel or submit NOC at the time of Interview.
5. Application should be complete in all respect. Write Not Applicable in the column which are blank.
6. Incomplete Applications, Applications without / or un-attested copies of documents will be rejected.

Date :

Applicant's Signature :

SCRUTINY SHEET

(To be filled in & Scrutinized by the College)

Page – 03

1. Post applied : _____ Subject : _____

2. Full Name : _____
(Surname First)

Date of Birth as per School Leaving Certificate	Age as on Last day		Maximum Age Limit	Remarks / Concession / Relaxation if any	Eligible / Not Eligible
	Years	Months			
/ / 19					

Post whether Reserved	Information Of candidate					Eligible / Not Eligible
	Category	Cast	Cast certificate	Validity certificate	Non creamy Layer	
Yes / No			Yes / No	Yes / No	Yes / Not applicable	

Sr. No.	Educational Qualifications	Year of Passing	Grade / Class	Percentage	Whether has Requisite Qualifications / Grade	Eligible / Not Eligible
1	UG					
2	PG					
3	PhD / PG DIP / etc					

Sr. No.	Approved Experience	Period of Experience			Whether has Requisite Experience in Cadre	Eligible / Not Eligible
		from	to	Duration		
1	As Professor					
2	As Reader					
3	As Lecturer					
4	As Tutor / Professional					

Level	No. of Publications / Research / Titles	Accreditations received, If any	Whether as per Relevance	Remarks	Eligible / Not Eligible
International					
National					
State					

MCH Registration No.	Valid Yes / No	Other Registration / Memberships	Remarks	Eligible / Not Eligible

Eligible / Not Eligible	Over all remarks with reason if not eligible,	Signatures of scrutiny committee members with their Names		
		Member	Principal	Chairman