OSMANIA UNIVERSITY

APPLICATION FORM FOR APPOINTMENT BY SELECTION TO THE POST OF DIRECTOR, EDUCATIONAL MULTIMEDIA RESEARCH CENTRE

Post for which you are applying

- 1. Demand Draft for Rs. as Registration fee payable to the Registrar, Osmania University
- 2. An application not accompanied by the Demand Draft will not be Considered

Demand Draft Particulars					
Name of the Bank	DD Number	Date	Value		

Photo of the candidate

The entries below should be in the Candidate's own handwriting.

: 2.

: 3.

: 4.

GENERAL INFORMATION

- 1. Name in full (Block Letters) : 1.
- 2. Age as on last date for receiving Application
- 3. Father's name and occupation
- 4. Permanent Address
- 5. Date of Birth

 5. Date of Birth

 6. Place of Birth

 7. Nationality

 8. a) Do you belong to

			Backward Class				
	SC	ST	Α	В	С	D	E
b) Mention the group and Su	b-Caste	9					
(with serial no.) to which y	ou belo	ng					

Exam Passed	Board /	Year of	Class /	Mar	'ks	% of	Subjects	Place
	University	passing	Division / Merit	Obtained	Out of	Marks	offered and passed	of Study
Matriculation 10 th								
Higher Secondary /Intermediate (10 +2)								
Bachelor's degree (Give name)								
Master's degree (Give name)								
M.Phil.								
Ph.D.								
Any other degree/ Diploma (Give name)								

9. Educational Qualifications (From Matriculation onwards)

Strike off whatever is not applicable

10. TEACHING OR OTHER EXPERIENCE:

Designation	Scale of Pay	Name of the University/ Institution Organization	Period of ServiceFromTo	No. of Years	Classes taught / Nature of work	Encl. No.

i) Undergraduate (U.G) classes B.A., B.Sc., etc.....yearsmonths

ii) Post-graduate (P.G) classes M.A., M.Sc., M.Phil., etc.....years......months

11. POST-DOCTORAL RESEARCH EXPERIENCE

	ing Ph.D. Degree	<u>e)</u>				•				
Position held	Emoluments	Name of the	Name of the Period of work		No. of years	Encl. No.				
	(Per month)	University /	-	-						
		Institution	-	-	-	-	r From	From To		
		iniciation								

The Period of post-doctoral research experience.....years......years......

12. RESEARCH GUIDANCE

	Number of Candidates		
	Awar	ded Und	er Supervision
M.Phil.			
Ph.D			
13. PUBLICATIONS (Give a list separately	y)	Encl. No	
	Published	Accepted/in print	Communicated

1)	Books	 	
ii)	Research Publications	 	
iii)	Other Publications	 	

14. RESEARCH PROJECTS CARRIED OUT:

Title of the Project	Name of the Funding Agency	Duration		
		From	То	

15. SEMINARS, CONFERENCES, REFRESHER COURSES, ETC. ATTENDED

Name of the Seminar	Name of the Organizer	Dura	ation	Nature of
Symposia/Conference etc.		From	То	Participation

16. DETAILS OF VISITS ABROAD

Countries visited	Purpose of visit	Duration	of Visit	Total	Period
		From	То		

17. LANGUAGES KNOWN

i) Spoken	ii)	Written
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18. MEMBERSHIP OF PROFESSIONAL BODIES, SOCIETIES, ETC

- 19. ACADEMIC DISTINCTIONS (AWARDS/HONOURS, ETC)
- 20. PARTICIPATION IN EXTENSION WORK/COMMUNITY SERVICE/CORPORATE LIFE (Give a short account of your contribution to community work, National Literacy Mission, etc)
- 21. Are you willing to accept the minimum initial pay offered? If not, state what lowest initial pay you would accept?.....

22. **REFERENCES:**

These should be persons residing in India holding responsible positions; they should be intimately acquainted with the applicant's conduct and character, but must not be relations.

Candidates are not expected to approach directly any of the persons whose names they give reference.

1.	Name	
	Occupation	
	Address	
2.	Name	
	Occupation	
	Address	
3.	Name	
	Occupation	
	Address	

DECLARATION TO BE SIGNED BY THE CANDIDATE

I hereby declare that the statements in this application are true to the best of my knowledge.

Date.....

Signature of Applicant

..

(FOR <u>GOVERNMENT</u> SERVANTS ONLY) UNIVERSITY

Endorsement by the <u>Head of the Department</u> Principal of the College

No.....

Date.....

Forward to the Registrar, Osmania University, Hyderabad (Telangana).

The applicant holds a permanent/temporary post under this Department/College. His character as far as is known to me, is good and his work suggests that he would be suitable for appointment, if he is selected for the post.

I certify that all the entries made in this application are correct according to his service book or Records maintained in this office.

I recommend that his application may be considered.

Full Signature.....

Designation.....