Sardar Vallabhbhai Patel University of Agriculture & Technology, Meerut – 250 110 (U.P.)

APPLICATION FORM FOR TEACHING POST

(To be filled by the candidate)

Please affix your latest passport size self attested photograph

[Part-1]

Name of Issuing SBI Branch						Draft Number Da					Dat	Date Am			Amount			
Post Applied for :																		
Advertisement No.																		
S. No of Post																		
Closing date for receipt of	applicatio	n																
Closing date for receipt of	аррисано	11																
1. Name in full (in capital																		
letters) First name-Middle																		
name-Surname																		
2. Date of birth (DD, MM,	Da	ay				Montl	1		Y	ear		Se		Mal	le		Fem	ale
YY) and Sex												X						
3. Age as on closing date	Da	ay				Montl	1		Y	ear								
4. Father's name																		
5. Designation of the																		
candidate (if employed)																		
6. Name of the Institution/																		
Organization where																		
employed.																		
7. Actual place of posting																		
8. (a) Full postal address for																		
correspondence with pin code;																		
8. (b) Telephone No., e-mail												0 r	nail:					
ID and Mobile no.												C-1	11a11					
9. Permanent address with																		
Pin code																		
10. Are you a citizen of																		
India? If so, whether by																		
birth/domicile.																		
11. *Category (Write															Physica	ıl handi	cap	
SC/ST/ OBC/ General and												-						
Name of State)/ Sub Category														Yes			N	O
Category																		
12. Have you ever been																		
convicted by a court of law																		
for any offence? If so,																		
details thereof.																		
13. Have you ever been																		
punished or debarred from																		
service of Government,																		
other organization. If so, details thereof.																		
14. Indicate if you possess	Essential																	
essential Qualification if yes	Lissciitiai																	
fill the full detail																		
15. If selected, are you																		
prepared to accept the																		
minimum initial pay																		
offered? If not, state the																		
lowest initial pay that you																		
would accept in the prescribed scale.																		
Signature of the Candidate :																		
Date and Place:																		

^{*}Attach attested copy of certificate issued by competent authority of U.P. government.

A.1 Academic Qualifications												
Exam/Degree/	Institute/Board/University	Year	Subject(s) with	Class/Division/	Rank/Medal/	Rema						
Diploma			major field	Grade/%marks	Award							

Exam/Degree/ Diploma	Institute/Board/University	Year	Subject(s) with major field	Class/Division/ Grade/%marks	Rank/Medal/ Award If any	Remarks	Annexure (Page No.)
High School							
Higher Secondary /10+2							
Graduation							
Masters							
Ph. D.							
Post-Doctorate							
NET							
Other							

Please enclose (i) attested copies of certificate/ Degree (ii) leave sanctioned document for period of Ph.D. in case Ph.D. was conducted as in service candidate with the application form.

B. Research Performance and Publications

B.1 Special Attainments (Technology development, Patent, Prototype, Genetic stock, Variety released, Process, Concept, Methodology, highlight any salient research/success story)											
Category	Title	Year	Individual /collaborative	Details Annexure (Pag No.)							

B2. Externally funded Research Project(s)										
Title	Year/Duration	As PI/Co- PI	Funding Agency Name	Amount	Major accomplishment	Annexure (Page No.)				

B 3. International Exposure										
Title of the programme	ramme Country visited Funding Year Agency					Time Period				
		rigency		From	To	Duration	(Page No.)			

B 4. In-service Award/Recognition / Fellowship/ President/Chairman/Member/Member Secretary of important Committees											
Name of the Award/Recognition / Fellowship /committee membership	Awarding Organization (place / country)	Year	International/ National / Institutional/ Award/ Recognition/President/ Member	Annexure (Page No.)							

Experience in relevant field			
Experience in the field of preferential qualifications including	SRF/JRF/PDF e	tc.	
Name of relevant Field	I	Ouration	Year
	From	To	

B5.	B5. Administrative/ Research Management Positions (RMP) / Project Management and In-charge.									
Nat	ure of Work	Dur	ation	Year						
		From	To							
B 5.	Publications									
1.	Research papers in foreign journals *									
2.	Research papers in NAAS referred national journals*									
3.	Review article in referred journals/Research paper in University journal/non referred journal /Book chapter/Lead paper in seminar/symposium									
4.	Books/Manuals (published by publishers)									
5.	Practical Manuals/training manuals (Institute level)									
6.	*Popular articles in magazine/bulletin/Abstract in published proceedings/souvenir									

^{*}Submit the list of research papers in following format:

Author	Year		Title	Jo	urnal witl Page		os.		T =:	1	ing if any			Annexur (Page No.)
								Thomse Reuters		AAS	University	Non referr	ed	1101)
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Undergraduate Item	e Teaching				Yea	ar	(Course I	Details		Individual /	collabo	rative	
M.Sc. / Ph.D. S member Advis			or guide / o	co- guide/	Name Studer	-	Title (of thesis			Year of con	pletion	of degr	ee
Success of Stud	dent (as major	guide)			Name studen	it S		Govt. ce/ARS/A			Scholarship Gandhi/ oth		RF/NE	Γ/Rajive
Research Institutional /for	unding agency	sponsor	ed /other /	individual										
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Extension Popularization	of now took	logica						1		I				
Title of technol		ologies			Metho adopte		Impa	ct assess	ment		Individual /	collabo	rative	
Innovation in 6	extension techi	ology ar	nd methods	s	Metho adopte		Impa	ct assess	ment		Individual /	collabo	rative	
Collaborative 6	extension prog	rammes												
Trainings cond Name of Train		ogramme	2		Year]	Durat	tion			No. of		ordinato	or
											beneficiarie	s /As	sociated	
Organization o	of Kisan Mela	Exhibit	tion		Year]	Durat	tion			No. of beneficiarie		ordinato sociated	
TV / Radio Tal	lks (Title and l	Date)												
Monitorin	g and rese	arch (Coordin	ation/repo	rt/polic	y form	nulat	tion/co	ordir	atio	n /compil	ation	etc.	
Item					Catego	ory	Year				Details			idual / orative
Others														
C2. Summer /		/ Course		rs/Symposia/W Seminars/	orkshop /	training	orgar		tended			Duratio		
Symposia/Cou)		semmars/ a/Courses/Woi	rkshop			Year		Duration From To				
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C3. Employme Design			scale	Nature of		Organ	nizatio	nclosed) on/ Instit of posti	ution		Period	(у		ration onth, day)
		ĺ		l						Fro	m To			

C4. I	C4. Institution/organization building										
Item				Details of Activ	vity	Level of Involvement		Annexure (Page No.)			
Admir	nistratio	n									
Infract	tructure	development									
mnast	nucture	acveropinent									
Labora	atory de	velopment									
Memb PG Fa		ider graduate f	aculty /								
	•	esearch/Extens	ion								
	ils/BON										
	tra Cur h certifi		ities (NCC,	NSS, sport, liter	rary, cultural, social o	r other similar activities,	excluding award,	etc of these categories etc.)			
S.No		Item	D	uration		Details		Annexure (Page No.)			
T :		+m + n			7						
E. Any	y other	specific infor	mation in s	upport of outsta	nding contribution no	t covered earlier					
					DECLARA	ATION					
a) I	hereby	declare that the	ne entries in	this application a	re true to the best of m	y knowledge/ belief and als	o that I have not co	oncealed any fact or with held			
a	any info	rmation regard	ding my pas	t services and rec	ord and that if any entr	y is found to be false or inc	orrect or that if at a	any time this is found to have			
			_	oyment notice care		able to termination without	any nonce or comp	vensation.			
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_							a				
Date a	and Pla	ce					Candidate's	signature			
					1.000 /6						
			Cert	ficate from pe	ersonnel Office (fo	r in service candidate	2)				
	C	ertified that	Mr/ Kuma	ri/ Smt/ Dr		S/o, D/o	is working	g as in			
								ary. No vigilance enquiry/			
		•									
	•	•				een punisned since last	5 years. His/ he	er work of last five years is			
	found	satisfactory.	If selected	he/ She will be	e relieved.						
	Office	File Ref. No.									
	Date										
						:	Signature				
							Name				
							Designation with				
							Phone No				
	E Mail ID										