मोलाना आज़ाद नेशनल उर्दू यूनिवर्सिटी مولانا آزاد نيشتل أر دويو نيورس MAULANA AZAD NATIONAL URDU UNIVERSITY

(A Central University established by an Act of Parliament in 1998)
Gachibowli, Hyderabad – 500 032
(Accredited "A" Grade by NAAC)



EMPLOYMENT NOTIFICATION NO.42/2017 DATED 08.02.2017

APPLICATION FORM FOR TEACHING POSTS

मोलाना आज़ाद नेशनल उर्दू यूनिवर्सिटी مولانا آزاد نیشنل اُر دویو نیورسی MAULANA AZAD NATIONAL URDU UNIVERSITY



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APPLICATION FORM FOR TEACHING POSTS

RECENT
PASSPORT SIZE
PHOTOGRAPH
DULY SIGNED BY
THE APPLICANT

I.	Na	me of the pos	t applied for:		, Subject:		
II.	Scl	hool/Departm	ent:				
III.	Em	ployment No	tification No & dat	te: <u>42/2017</u>	dated: 08.02	2.2017	
IV.	Fee	e particulars:					
3	DI) Number	Date	Amount	Name of the B	Bank DD i	ssuing Branch & Address
V.	Pers	sonal Details	of the candidate:				
	1.	Name:(IN CAPITAL L					
	2.	Parent's Name	e (a) Father				
			(b) Mother		2		
	3.	Husband's Na	me (in case of marr				
	4. I	Date of Birth: (As recorded in M	Day	Month nt certificate, enclo	ose the certificate)	Year	
	5. A	Age (as on the	last date receipt of	application)	years	sn	nonths
	6. 1	Nationality		7. N	Married / Unmarr	ried	
	9. (/ Female deneral/SC/ST/OBC ompetent authority must be)BC&PWD	
	10.	If the applican	nt is PWD, the follow	wing relevant p	articulars may be	e mentioned:	х
					If applicable, write 'yes'	Percentage of disability	Encl. No. of proof enclosed
			or Low Vision				
		(b) Hearing In		al Dalas			
			r Disability or Cerebr cases of Orthopedic H				

VI. Educational Qualifications:

		Month &	Class/	Ma	rks	% of	CGPA		Encl. No.
Exam. Passed	Name of the University	Year Passed	Div/ Merit	Obtained		Marks	if grading system is applicable	Subjects studied	of proof enclosed
10 th Class or equivalent	9		A 22						1
Inter/Sr. Secondary or equivalent					×		-		
Bachelor's degree (Give name)									
B.Ed. or Equivalent							,		
Master's Degree (Give name)					-				
M.Ed. or Equivalent									
M.Phil / equivalent						-	-		
Ph. D.									
Any other Degree/ Diploma									
(Give name)									
Technical Qualifications							-		
			10	ž.					

VII.	(a)	Whether the	candidate	qualified	UGC/CSIR	NET:	Yes/No
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- (b) Whether the candidate has qualified UGC, JRF: Yes/No
- (c) Any other equal (SET/SLET) qualification: Yes/No

(if yes, give details of Subject, year and enclose proof):

Whether you possess the knowledge of Urdu reading, writing and speaking (please tick YES/NO). If Yes, proof must be furnished (Encl. No. of proof enclosed:______).

Reading	Yes	No
Writing	Yes	No
Speaking	Yes	No

IX. Total Period of Teaching Experience:

Name of the	Designation	Nature of	Class ta	ught	Duration	Length of experience		Sl. No.
University/Institution	and scale of pay	post Temporary /Permanent	Under Graduate Polytechnic (if applicable)	Post Graduate	(give Details)	years	months	of proof enclosed
					× 2 2			
		e r					3	
					Total:			

X. Post -Doctoral Research and other experiences:

Name of the University/Institution	Designation and scale of pay	Nature of post Temporary /Permanent	Nature of Assignment	Duration	Length of experience		Sl. No. of proof
					years	months	enclosed
				2		8	= "
						,	
	,						2
		=	2 2 2	8			

	v		3 3	2 4		-	7
XI. A	dministrative l	Experience, if	f any (details	as proof encls	no.):		
1.							
2.							
	Academic Distease give details				s, etc.) (pro	of as encls. N	0)
1.							
2.							
3.							
4.							

XIII. Research publications:

Publications	Published (No. of Publications)	Sl.No. of proof enclosed	Accepted / In Print (No. of Publications))	Sl.No. of proof enclosed	Communicated to Publishers (other than b & d (No. of Publications)	Sl.No. of proof enclosed
(a)	(b)	(c)	(d)	(e)	(f)	(g)
Books		*				, s
Research Publications						
Other Publications						

XIV. Branch of Specialization, if any:

XV. Supervisor for research degrees: Awarded Research in Progress

	Awarded (No. of candidate)	Sl.No. of proof enclosed	Under Supervision (No. of candidate)	Sl.No. of proof enclosed
M.Phil. / Equivalent			le V	
Ph.D.				

VVI	Mam	horchi	n of I	agrand	Radias
XVI.	viem	ibershi	D OI L	earned	Boales

- 1.
- 2.
- 3.
- 4.

XVII. Number of literary, cultural or other activities

(e.g. attainment in sports etc.) in which the applicant is interested and Distinctions, if any, obtained the same.

XVIII. Research Projects carried out:

			Sl.No. of		
Title of the Project	Name of the Funding Agency From		То	No. of years / months / days	proof enclosed
		2			

XIX. Details of visits Abroad:

Countries visited	5 St. //	,	Sl.No. of		
	Purpose of visit	From	То	No. of years / months / days	proof enclosed
		1 0			

XX. Participation in Corporative Life:

(Give a short account of your contribution to the College /University/ Institution where you serve or serving at present in the matter of co-curricular activities, enrichment of campus life, student Welfare, committee work, etc.)

XXI. Any other information not covered above:

XXII. Present basic pay and allowances (state separately)

Scale:

Rs.

Allowance:

Rs.

Basic Pay:

Rs.

Dearness Allowance

Rs.

City Compensatory

Rs.

House Rent Allowance Rs.

Any other Allowance

Total emoluments: (per month) Rs.

- (b) Date of next increment:
- (c) Age of retirement in the present post:

XXIII.

- (a) Whether the candidate is receiving any pension benefits? If so, the amount of pension equivalent of gratuity must be indicated.
- (b) Whether the candidate would be entitled to any pension benefits on his premature retirement form his present post, if selected for appointment in the University, and, if so, the amount of pension and the pension benefits may be indicated.
- State whether you have been at any time (a) dismissed, removed or debarred from Service or (b) convicted by a Criminal Court. (Please tick YES/NO)

XXVI. Names & address with phone numbers whom a reference can be made about	bers of two responsible persons not related to you to t you:
1.	
2.	
XVII. Candidate Name & Address:	
Mailing Address	Permanent Address
(Name & Address with PIN Code)	(Name & Address with PIN Code)
Phone No. (Landline	
Phone No. (Landline with STD code)	
Mobile No.	
Phone No. (Landline with STD code) Mobile No. Alternate Mobile No.	
Phone No. (Landline with STD code) Mobile No. Alternate Mobile No. XVIII. Declaration: I hereby declare that all the details given by belief. If anything is found false at any stage	me in this application are true to the best of my knowledge
Phone No. (Landline with STD code) Mobile No. Alternate Mobile No. XVIII. Declaration: I hereby declare that all the details given by	

State how you satisfy the requirements of the advertisement in respect of qualifications and experience prescribed for the post.

XXV.

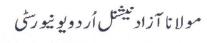
XXIX. Endorsement by the Employer:

(The endorsement below is to be signed and forwarded by the Head of the Department / Employer of the organization / institution in the case of in-service candidate whether in permanent or temporary capacity).

2 OT III GEO	l to Maulan	a Azad Nat	<u>ional Urdu U</u>	niversity, Gachibo	wli, Hyderaba	id.	
Post applied	for			_, Subject			
School/Depa	rtment						
Name							
Mailing Add							
Present scale	(with AGP)	= 1	,	Present Basic Pay Rs:	n	p.m.	
Present gross emoluments Rsp.			n.				
	loyer (Institut						
	-	Γ/OBC/PWD:					
				Months			
				Months			
				, Year			
Academic Q	ualifications		,	Publications & Res (Give number)	earch Work		
Exam	Year	Marks %	University	Published	unpublished	Under Publication	
				Books			
				Research			
				Papers		and the second	
				Articles			
		2				2 1	
			1	8 - 2		=,	
19		0 0				8 6	
EXPERIENC	CE			Research Guidance			
				Number of Scholars			
Institution	Post	From	То	Ph.D./M.Phil. degree	Under	Research in	
	held/Pay				submission	progress	
				Ph.D M.Phil			
.0				I IVI PIIII			

Recommendation of the Forwarding authority, Signature of forwarding authority with seal.

मौलाना आज़ाद नेशनल उर्दू यूनिवर्सिटी





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ACKNOWLEDGEMENT

Received an	application	from Dr./Mi	r./Mrs./	Ms					
for the post	of				11		_ in re	sponse t	o the
Employment	Notification	No.42/2017	dated	08.02.2017	along	with a	a D.D.	bearing	No
	,	dated	= 1,	for	Rs		dra	awn on	Bank
								В	
Date:	<u> </u>					Signat	ure of th	e Receiv	/er