Leela Devi Parasmal Sancheti Kanya Mahavidyalaya, Vidyawadi(Khimel), St. Rani Distt- Pali (Rajasthan) 306115 Tel- 02934- 222994, Email- <u>Idpsvidhyawadi@gmail.com</u>

Website- www.vidyawadi.org	Advertisement No.
Application for the Post of Principal / Lecturer (Use separate form for each	
Name of the Post	(For Office Use)
Department	Diary No Dated:
A Name in Full Mr./Mrs./Ms(In block letters)	
Father's Name:	Affix recent Passport size photograph
Date of Birth:	(Not older than six Months)
Nationality: Marital Status:	
Member of Scheduled Caste/Tribe/Backward Class/Physically Handicapp Yes/No (If Yes, please attach certificate from Tehsildar /First Class Magistrate of the a	
B. Addresses: Permanent address (in block letters):	
Present Address: (for Correspondence) (in block letters):	
Phone/ Mobile No E-mail:	
C. Minimum Pay acceptable: Joining time (If	Selected)

Examination	Univ/Board	Main Subject	Month and Year of Passing	Marks Obtd.(with Max Marks	Class/ Divn./ Grade (attach conversion formula)	Merit/Prizes Medals won if any.
1. Matric						
2. 10+2/Pre-Me Pre- Engg.	ed /					
3. B.A/B.Sc/ B.Com. etc.						
4. M.A/M.Sc/ M.Com etc.						
5. M. Phil						
6. Ph. D.						
7. Any other Exam. (plea specify)	se					
8. UGC NET/C /SET	CSIR					
E. Profession	nal Training:			1	1	
S.No. Organi	sation		Period		Details	of Training
		From		То		

Name & Address Employer/Institution	Date	e of	Designation	Nature of Job	Basic Pay (p.m.) & Grade (Pay-scale)	REASON FOR LEAVING
	Joining	Leaving				

G. (A.)(i) Published Papers in Journals/Full papers in Conference Proceedings

S.N.	Title with page no.	Journal/ Conference proceedings	ISSN/ ISBN No.	Whether peer reviewed. Impact factor, if any	Whether you are first/principal/cor responding author/superviso r/ mentor
1					
2					
3					
4					
5					
6					
7					
8					

S.N.	Title	Type of (text/refe		ISSN/ISBN No. and publisher	Whether peer reviewed	No. o author
G.	A. (iii) Papers p	resented in Conferen	ces, Seminar	s, Workshops, Syr	nposia if any	
S.N.	Title of the paper presented	Title of Conference/Semin ar etc	Date(s) of the event	Organized by	Whether Inte National/Stat /University of Lev	e/Regional or College
acc res	ese should be profe	ability and character. Fo	or applicants ha	ving done post-doct	spects of the applicant's toral and/or doctoral resthese referees be attach	earch, the
	Name	Occupation/Pos		Address E	mail and Tel. /Mobile	No.
1						
2						

1		2.	3	4.	
			7.		
M. Decl	aration: I solemnly	declare that:			
	-	iven in the appliest of my knowled	cation form and the d	ocuments attached	herewith are true and
Place:		_			
Dato:					Signature of Applicant

L. List of Enclosures: