

SUMMARY FORM FOR ENGAGING TEMPORARY FACULTY IN THE FOLLOWING DEPARTMENT/CENTRE:

1.	Name					
2.	Father's Name					
3.	Date of Birth					
4.	Address for correspondence					
5.	Category: Gen./ SC/ PwD / OBC					
6.	E-mail ID					
7.	Mobile No.					
8.	Educational Qualification	Branch/ Field	% of Marks or CGPA	Division	University	Year of passing
	Bachelor's Degree					
	Master's Degree					
	Ph.D. (completed or thesis submit)					
	Any other qualification					
9.	Experience (in years (Y) and Months (M))	Teaching	Research	Industry		
		___Y___M	___Y___M	___Y___M		
10.	Research Papers (Nos.)	Journals		Conference Proceeding		
		National	International	National	International	
11.	Books Published					

Date:

Signature of Applicant

(For office use only)

REMARKS OF THE VERIFICATION COMMITTEE:

Signature of Verification Committee