University of Kerala

12. Whether qualified UGC/CSIR NET : Yes

(If yes, give details)

Thiruvananthapuram

www.keralauniversity.ac.in

size

Application for the Post of Lecturer in English on contract basis, at University Institute of Technology Regional Centres

1. Name i	n full (In Block Letters)	:								
2. Date o	f Birth	:								
3. Age as	s on 01.01.2020	:	:							
4. Sex		:					Affix here a Recent Passport size			
5. Mailing) Address	:					Photograph			
		Pin								
6. Perma	nent Address	:								
		Pin								
7. Phone	/ Mobile			ļ	<u> </u>					
8. E-mail		:								
9. Religio		:								
10. Cateo (Please a	gory lttach attested photocopy of	:the valid Certificate for t								
11 <u>. Educ</u>	ational qualifications	:								
#	Name of exam passed (SSLC onwards)	Board/ Univers	ity	Bran	ch/ Subject	% of Marks	Year of Passing			
(Ple	ase attach photocopies in su	upport)								

No

13. Teaching	Experience ((if any	/):
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#	Name of the most	I a a dide edit a ca	Pe	riod	Completed	
	Name of the post	Institution	From	То	Completed No. of Years	

(Please attach photocopies of the Experience certificates in the prescribed format)

14. International/ National/ State Seminars or Conference Paper presentations: (Attach separate sheet, if necessary)

#	Title	Title Seminar/Conference						

(Please attach photocopies of the certificates)

15. Research Publications in Journals: (Attach separate sheet, if necessary)

#	Title of Publication	Month & year	

(Please attach photocopies of the publications)

16. Fee Details:

Mode of remittance	D.D./Chalan/ Banker's Cheque No.	Bank & Branch	Amount

DECLARATION TO BE SIGNED BY THE CANDIDATE

1	hereby	/ declar	e tha	t the i	nformatio	n giv	en by	me in the Ap	plic	ation is tru	e, co	omplete	and c	orrect	to the h	oest	of my
knowledge	and	belief	and	that	nothing	has	been	concealed	or	distorted.	If a	at any	time,	I am	found	to	have
concealed	/distor	ted any	infor	matio	n or give	n any	/ false	statement,	my	application	/app	ointme	nt shal	II liable	to be	sumr	marily
rejected/te	rminat	ed with	out n	otice (or compe	nsati	on.										

Place	:	 	 	
Date	:	 ١	 ١	

(Signature of the Applicant)