



St. Xavier's College - Autonomous Mumbai - 400001

APPLICATION FOR A TEACHING APPOINTMENT DEGREE COLLEGE

From:

Mr. /Ms _____

Address _____

Pin Code _____

Tel: _____ Cell No. _____

E-mail: _____

PAN No: _____

Aadhaar No: _____

To,
The Principal,
St. Xavier's College-Autonomous,
Mumbai- 400 001.

Sir,

With reference to your advertisement in _____ dated _____, I would like to be considered for a teaching post in the **Degree College** at St. Xavier's College - Autonomous in the subject of: _____.

Following are the relevant particulars.

I. (a) Academic Qualifications:

<u>Degree</u>	<u>Subjects offered</u>	<u>Month & Yr of passing</u>	<u>Total Marks Class obtained with Percentage Total/Out of</u>	<u>School / College</u>	<u>Board / University</u>
1. S.S.C. (X)					
2. H.S.C. (XII)					
3. B.A./B.Sc./B.Com					
4. M.A./M.Sc./M.Com.					
5. M.Phil./M.Tech.					
6. Ph.D.					
7. NET/SET					
8. Other Degrees					

(b) Other Qualifications if any (Certificates, Diplomas, etc.):

II. Research & Academic Contributions: (Attach separate sheet with details of the following)

	Yes/No (if yes attach details)
a) Research Papers in refereed Journal:	
b) Non-Refereed but with ISBN/ISSN Numbers:	
c) Text Books/Reference Books/Chapters in Books:	
d) Major Funded Research Projects:	
e) Presentation of Paper at Conferences:	

III. Whether participated in Refresher Course/Orientation Programme: (Attach Certificates)

Duration		Name of Institution
From	To	

IV. Experience & Extra – Curricular Activities:-

(a) Teaching experience if any: (If with Teaching Experience, attach Copies of University Approvals)

Institution (College/Univ. Dept)	University	Position held	Nature of appointment Full-time, Part-time, Permanent, Temporary, Probationary etc.	Period of appointment with dates	Subjects & Classes taught	Reason for leaving previous appointment

(b) Extra-Curricular Activities (As a student/staff)?

V. Other Details:-

(a) Married or single _____ Age : _____ Date of Birth : _____

Place of Birth: _____ Nationality _____ Religion _____

If Backward Class; give particulars:

(b) Names & address of responsible persons to whom a confidential reference about me may be made:

1. Name: _____

2. Name: _____

Address: _____

Address: _____

_____ Tel No. _____

_____ Tel No. _____

VI. If belonging to Handicapped Category: Mention nature & % of handicap (Attach relevant certificate):

VII. Enclosures :

Certified copies of marksheets / Documents	Tick appropriate details	Certified copies of marksheets / Documents	Tick appropriate details
1. Date of birth (SSC/Matriculate Passing Certificate/Municipal Birth Certificate /School Leaving Certificate)		5. M.A./M.Sc./M.Com. Marksheets	
2. SSC (Class X Marksheet)		6. NET/SET Certificate	
3. HSC (Class XII Marksheet)		7. M.Phil./Ph.D./M.Tech Marksheets	
4. B.A./B.Sc./B.Com. Marksheets		8. Ph.D. Notification & Degree Certificate	

VIII. Others (if any please mention):

Yours faithfully,

Date: _____

(Signature)