



St. Xavier's College

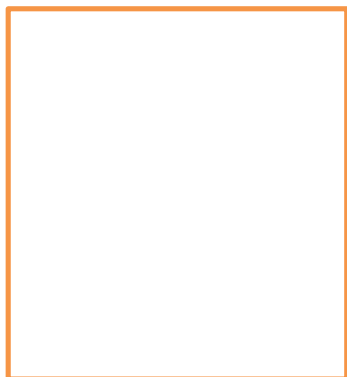
(Empowered Autonomous Institute)

Mumbai – 400 001

Sr.
Ad-hoc



APPLICATION FOR TEACHING APPOINTMENT (Degree College)



From:

Dr. /Mr. /Ms. _____
(in Capital letters)

Address _____

Pin Code _____.

Tel: _____ Mobile No. _____

E-mail: _____

PAN No: _____

Aadhar No: _____

To,
The Principal,
St. Xavier's College (Empowered Autonomous Institute),
Mumbai- 400 001.

Sir,

With reference your advertisement on College Website, dated 3rd October, 2026, I would like to be considered for a Teaching Post (Ad-hoc) in the **Degree College** at St. Xavier's College (Empowered Autonomous Institute) in the subject of : _____.

Following are the relevant particulars.

I. (a) Academic Qualifications:

<u>Degree</u>	<u>Subjects offered</u>	<u>Month & Year 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, Visiting, Probationary etc.	Period of appointment with dates	Subjects & Classes taught	Reason for leaving previous appointment

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

V. Other Details:-

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

Place of Birth: _____ Nationality _____ Religion _____

If Backward Class; give particulars: _____

(b) Professional References: Please provide the details of two responsible individuals (**not related to you**) whom the college may contact for a confidential assessment of you. At least one referee should be your current or most recent employer/reporting officer.

1. Full Name: _____ 2. Full Name: _____

Current Designation: _____ Current Designation : _____

Institution / Organization : _____ Institution / Organization : _____

Affiliation to Applicant : _____ Affiliation to Applicant: _____
(e.g., Ph. D. Guide, Former HOD) (e.g., Ph. D. Guide, Former HOD)

Email : _____ Mobile: _____ Email : _____ Mobile: _____

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):

Declaration:

I hereby declare that:

1. I am aware of and shall abide by the provisions of the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH Act), and I understand that the institution is committed to maintaining a safe, respectful, and inclusive environment for all staff and students.
2. All the information provided by me in this form and the attached documents is true and correct to the best of my knowledge and belief. I understand that any misrepresentation may lead to appropriate action as per institutional norms.

Yours faithfully,

Date: _____

(Signature)