|  |
| --- |
| **SAMBALPUR UNIVERSITY****Jyoti vihar, burla, odisha** |

**PrOforma for Promotion Under CAS PROMOTION**

**Advertisemnt no: ………………………. date: ……………..**

**General Information and Academic Background Part-A**

(Refer to UGC guidelines 2018 on CAS promotion for University Teachers)

(PLease tick the required box)

|  |  |  |
| --- | --- | --- |
| 1 | Assistant Professor from Stage 1 to Stage 2 | Academic Level 10 to Academic Level 11 |
| 2 | Assistant Professor from Stage 2 to Stage 3 | Academic Level 11 to Academic Level 12 |
| 3 | Assistant Professor from Stage 3 to Associate Professor (Stage 4)  | Academic Level 12 to Academic Level 13A |
| 4 | Associate Professor from Stage 4 to Professor (Stage 5)  | Academic Level 13A to Academic Level 14 |

(1) Name in full: Shri./ Smt./ Ms./ Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (In Block Letters)

(2) Present designation with Academic Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(3) Date of joining in the present designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(4) Date of Eligibility for Promotion

For the Position of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(5) Duration of Assessment period for promotion to next Academic Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(6) Department: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) Nationality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(7) Date of Birth Age : \_\_\_\_\_\_ Birth Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 D D M M Y Y Y Y

(8) Marital Status **(√** ) Married Single

(9) Please Tick **(**√ **)** appropriate. Please enclose Caste / Medical Certificate of appropriate authority, if applicable

 S.C. S.T. SEBC General Divyang

(10) Full Address for correspondence (In Block Letters)

|  |  |
| --- | --- |
| (i) Present \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN Dist. \_\_\_\_\_\_\_\_\_\_\_\_\_ State:Mobile No. E-Mail :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (ii) Permanent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN Dist. \_\_\_\_\_\_\_\_\_\_\_\_\_ State:Mobile No. E-Mail :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

(11) Educational Qualifications: (Only submit photocopy of your Ph.D degree/notification, if applicable)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr. No. | ExaminationPassed | Principal Subjects | Name of the University or Examination Body | Full Marks | % of Marks secured with Div., Class, Grade | Year of passing |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| 1 | S.S.C |  |  |  |  |  |
| 2 | H.S.C. |  |  |  |  |  |
| 3 | Graduation |  |  |  | Overall %:Hons %:Distin.: Yes/No |  |
| 4  | Post Graduation  |  |  |  |  |  |
| 5 | M. Phil. |  |  |  | Date : |
| 6 | Ph.D. |  |  |  | Date :  |
|  | Title of Ph.D. Thesis | **:** |
| 7 | Others |  |  |  |  |  |

(12) Total Teaching/Research Experience (Full Time, Regular):

(13) Area of Specialization: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(14) Date of award of Ph. D.: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(15) Awards for Best Research Article/Paper Published/Essay Competition/etc (in the relevant period):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. No.** | **Name of Award** | **State Level/ National level/ International Level** | **Awarding Body** | **Date** |
|  |  |  |  |  |
|  |  |  |  |  |

(16) Visits to other Institutions for Academic Purpose (National/International) (in the relevant period):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. No.** | **Institutions** | **Duration** | **Purpose of Visit** | **Sponsoring****Agency** |
| **From** | **To** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

(17) Name of Professional Associations in which you have held important positions or have been active member of/ Fellowship of Academic Societies/ Others.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sr.****No.** | **Designation** | **Body/ Institutions** | **From** | **To** | **Duration** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

(18) Any other relevant information (Not mentioned above):

Declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby solemnly certify that all the information provided in this application form is true and correct to the best of my knowledge and belief. I also declare that I am eligible for the applied post as per CAS UGC 2018 guidelines and have also filled in the Part-B and Part-C of the application form (which is being submitted along with the Part-A of form) for calculation of the Research Score. I also declare that the ACR reports of the required duration have been filled and submitted with the Head of the Department.

Place: Signature of the applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Designation

|  |  |
| --- | --- |
| Signature Head of the DepartmentDepartment of ………………… | Signature of Chairman, PGCO |

Forwarded by:

|  |  |
| --- | --- |
|  |  |
|  |  |