



INTEGRAL UNIVERSITY

KURSI ROAD, LUCKNOW, UP

Established under UP Act No. 9 of 2004
Recognized by UGC under Section 2(f) and 12(B)

FORM OF APPLICATION FOR APPOINTMENT OF THE DEAN/SENIOR PROFESSOR IN THE UNIVERSITY

(To be filled in by the applicant)

Affix recent
passport size
Self-attested
photograph

Advertisement No & Date: _____

Post Applied for: _____

1. Name of the applicant (in Block Letters)

2. Father's/ Husband's Name

3. Date of Birth

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 Age

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 Gender

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 Marital status

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4. (i) State to which you belong _____

(ii) Nationality _____

5. Permanent

Address _____
Pin _____

6. Correspondence Address

_____ Pin _____

7. Specify whether the candidate belongs to SC/ST/BC/PwD (if so, please state clearly and attach a certificate in support thereof).

Mobile _____ Email _____

8. Educational Qualifications:-

S. No.	Examination Passed	Subject	% age of total marks/grade	Year of passing	University / Board	Remarks (if any)
1.	Ph.D.					
2.	M. Phil.					
3.	M.A / M.Sc. / M.Com./ M.Tech.					
4.	B.A / B.Sc. / B.Com / B.Tech.					
5.	10+2					

6.	Matric					
7.	NET/SLET					
8.	Any other course					

(If required information may be furnished on separate sheets)

9. Title of MD/MS/Ph.D. thesis and year of submission & awarded _____

10. Field of specialization _____

11. Prizes, medals & scholarships received, if any _____

12. Particulars of previous employment

S. No.	Position & nature of duties	Salary & grade	Date of joining	Date of leaving	Name of employer	Reasons for leaving the job, if any

(If required information may be furnished on separate sheets)

13. a) Teaching experience, if any (indicate period in years); b) Research experience, if any (indicate period in years excluding the period spent for completing Ph.D / M.Phil)

S.No.	Experience	UG level	PG /Post-doctoral level	Remarks
1.	Teaching experience			
2.	Research experience			
3.	Clinical/Hospital experience			

14. Supervisor for research degrees (Give number)

Degree	Awarded	Thesis / Dissertation	No. of Research Scholars working under him/her
(1)	(2)	(3)	
1. Ph.D.			
2. M. Phil.			
3.			

(i) Details of being an eminent scholar/ Outstanding Professional/Industry/Medical/Health Organization to be supported by documentary evidence

(ii) Details of significant contribution to knowledge.....

(iii) Evidence of being actively engaged in research or innovation or in teaching methods or production of teaching material.....

(iv) Experience of Industry/Hospital or Professional Field which should include innovation and/or Research development

15. Particulars of visits abroad:

S. No.	Country	Date	Duration	Purpose
1.				
2.				
3.				

16. * **Research Publications:**

Publications	Published (No.)	Accepted for Publication (No.)
(a) Books		
(b) Research Papers (Range of impact factor)		
(c) Articles (Range of impact factor)		
(d) Papers read at conferences (Give numbers)		

(* Please give on a separate sheet the title of books/papers/articles. etc. published and/or presented, together with the names, volumes and years of journals and attach abstracts of copies of papers.)

17. **Seminars, Conferences etc. attended (attach list)**

S. No.	Attended		Paper Presented		Remarks
	National & International	Abroad	National & International	Abroad	
1.					
2.					
3.					

18. **Mention briefly your extra-curricular activities, including the administrative post held, if any, under the following heads (Use separate sheet, if necessary):**

- (a) University/Hospital administration.
- (b) Extra-curricular activities of students.
- (c) Residential life of students.
- (d) Literary, cultural or other activities (e.g., Attainment in sports, NCC etc.).

19. Membership of Academic bodies: _____ (state number of bodies and attach their list)

20. Have you ever been disqualified from appearing in any examination or undertaking any university work ? Yes / No

21. Have you ever been placed under suspension/dismissed from service or stopped to cross efficiency bar ? Yes / No

22. Have you ever been convicted or any criminal proceeding pending against you in the Court of Law ? Yes / No

Additional remarks *

*Applicants may mention any special qualification or experience which does not fall under the above heads. Also, state briefly why do you consider yourself fit for the post applied for. (Use separate sheet, if necessary). Attach updated CV alongwith the application.

Declaration

I hereby declare that the entries in this form and the particulars furnished are true to the best of my knowledge and belief and if it is found that I have either concealed or given wrong information, my candidature may summarily be rejected.

Place: _____

Date: _____

Email: _____

Signature of the Applicant

23. **If employed, Remarks of the forwarding authority.**

Place.....

Signature

Name

Date.....

Designation

(Office Stamp)