

# YOGI VEMANA UNIVERSITY

(A State University established by Govt. of A. P.)  $KADAPA - 516\,003$ , Andhra Pradesh, India.

Stamp size photo duly attested

# **Recruitment of Teaching Staff**

|              |                             |               |               |          |                   | Dated       | /                       | /              |
|--------------|-----------------------------|---------------|---------------|----------|-------------------|-------------|-------------------------|----------------|
| ADVERT       | TISEMENT                    | No.           |               |          |                   | Dated       | 1                       | ,              |
| POST AP      | PLIED FOR                   | <b>k</b> :    |               |          |                   |             |                         |                |
| Departme     | nt/Subject:                 |               |               |          |                   |             |                         |                |
| Specializa   | ation if any:               |               |               |          |                   |             |                         |                |
| Details of   | Demand I                    | Oraft:        | Amou          | nt I     | emand<br>raft No. | Date        | Name of the B<br>Branch | ank and        |
|              | of the appli<br>ne with cap |               |               |          |                   |             |                         |                |
| (ii) Father' | 's Name:                    |               |               |          |                   |             |                         |                |
| (iii) Mothe  | r's Name:                   |               |               |          |                   |             |                         |                |
| 2. Date of l | Birth:                      |               | Day           | Month Ye | ar Age(a          | s on date): | /                       | /              |
| 3. Place of  | Birth:                      |               |               |          | 4. Dist           | trict:      |                         |                |
| 5. Nationa   | lity:                       |               |               |          | 6. Gen            | ider: Male  | e / Female              |                |
| 7. Religior  | n:                          |               |               |          | 8. Cas            | et:         |                         |                |
| 9. Aadhar l  | No:                         |               |               |          |                   |             |                         |                |
| 10. Do you   | ı claim any                 | reservation ( | (put √ mark): |          |                   |             |                         |                |
| SC           | ST                          | BC – A        | BC – B        | BC-C     | BC – D            | BC-E        | PH (Specify)            | Others(Specify |
|              |                             |               |               | 1        |                   | 1           |                         |                |

If Yes, enclose attested copy of the certificate obtained from a competent authority not below the rank of Mandal Revenue Officer.

| 11. A         | ddress f | or communic  | ation:                                       |                  | Permanent Address |                     |          |               |        |                        |                                     |
|---------------|----------|--|--|------------------|-------------------|---------------------|----------|---------------|--------|------------------------|-------------------------------------|
|               |          |  |  |                  |                   |                     |          |               |        |                        |                                     |
| Pin Co        |          |  | Mobile No.                                   |                  |                   | in Code             |          |               | Mob    | ile No.                |                                     |
| Email         | ID:      |  |  |                  | E                 | mail ID             | <u>:</u> |               |        |                        |                                     |
| (Exan         | nination | qualifications:<br>s passed from<br>sed with self- | matriculation / H                            | Higher Sec       | ondary            | onwar               | ds) (Si  | tart with hig | gher d | legree) (Xer           | rox copies                          |
| Exam          | ination  | Name of the Course                                 | Subject                                      | Year o<br>Passin |                   | of Marl<br>obtained |          | Division      |        | ool/College<br>Studied | Name of th<br>Board /<br>University |
| PG            |          |  |  |                  |                   |                     |          |               |        |                        | Ţ                                   |
| UG            |          |  |  |                  |                   |                     |          |               |        |                        |                                     |
| Interm        | ediate   |  |  |                  |                   |                     |          |               |        |                        |                                     |
| SSC<br>Others |          |  |  |                  |                   |                     |          |               |        |                        |                                     |
| 14. W         | hether q |  | (e.g. any Prize, M<br>ET/SLET/SET: Y<br>s: - |                  | ard etc.          |                     | Year     | of Passing:   |        |                        |                                     |
| De            | gree     |  | Title of the The                             | esis             |                   | Subj<br>Disci       |          | Date & Yo     |        | Univ                   | ersity                              |
| M. Ph         | nil      |  |  |                  |                   |                     |          |               |        |                        |                                     |
| Ph.D.         |          |  |  |                  |                   |                     |          |               |        |                        |                                     |
| Specif        | fy Area  |  |  |                  |                   |                     |          |               |        |                        |                                     |
| of Res        | search   |  |  |                  |                   |                     |          |               |        |                        |                                     |
| 16. Po        | ost-Doct | oral Experier                                      | nce if any:                                  |                  |                   |                     |          |               |        |                        |                                     |
| Sl.<br>No.    | Posit    | ions Held  | Awarding Organ                               | ization          | Emolu:            |                     | Titl     | e of the Proj | ect    | From                   | То                                  |
|               |          |  |  |                  |                   |                     |          |               |        |                        |                                     |
|               |          |  |  |                  |                   |                     |          |               |        |                        |                                     |

| 17. (a) Post held, if any, | , at the time of sending | the application | with date of a | ppointment: | (Copy of |
|----------------------------|--------------------------|-----------------|----------------|-------------|----------|
| evidence)                  |                          | **              | •              | • •         |          |

- (b) Whether the post is Temporary or Permanent / Aided / Un-Aided : and ratified by the University
- (c) Pay Scale: Whether APR UGC 2006/State-RPS 2006 / Consolidated: Pay Band with AGP:

| Basic Pay | AGP | DA | HRA | Other Allowances | Total |
|-----------|-----|----|-----|------------------|-------|
|           |     |    |     |                  |       |
|           |     |    |     |                  |       |

18. Teaching experience at Universities or Degree Colleges:

| Name of the  | , • |            | Scale of |      |      | Period |    | Length of service |        |
|--------------|-----|------------|----------|------|------|--------|----|-------------------|--------|
| University / |     | Post       | Pay      | Tau  | ght  |        |    |                   |        |
| College      |     | Temporary/ |          | U.G. | P.G. | From   | То | Years             | Months |
|              |     | Permanent  |          |      |      |        |    |                   |        |
|              |     |            |          |      |      |        |    |                   |        |
|              |     |            |          |      |      |        |    |                   |        |
|              |     |            |          |      |      |        |    |                   |        |
|              |     |            |          |      |      |        |    |                   |        |
|              |     |            |          |      |      |        |    |                   |        |

#### 19. Details of Research Publications / Books:

(Enclose list of publications / books / research articles in chronological order stating the Citation Index &

Impact Factor of the journal and enclose to the application)

| Impact Factor of th | impact ractor of the journal and encrose to the approachon) |          |   |      |                                   |  |  |  |
|---------------------|---|----------|---|------|-----------------------------------|--|--|--|
| Description         | Published   | Accepted | Name of the Publisher Journal with ISBN/ISSN Number | Year | Citation Index /<br>Impact Factor |  |  |  |
| Book                |   |          |   |      |                                   |  |  |  |
| Book Chapters       |   |          |   |      |                                   |  |  |  |
| Research            |   |          |   |      |                                   |  |  |  |
| Publications        |   |          |   |      |                                   |  |  |  |
| Other Publications  |   |          |   |      |                                   |  |  |  |

### 20. Research Projects:-

| Title of the Project | Duration | Funding<br>Agency | Grant received In Rs. | Status |
|----------------------|----------|-------------------|-----------------------|--------|
|                      |          |                   |                       |        |
|                      |          |                   |                       |        |
|                      |          |                   |                       |        |
|                      |          |                   |                       |        |
|                      |          |                   |                       |        |

| 21  | <b>Particulars</b> | of the | Pacaarch | Guidanca   |
|-----|--------------------|--------|----------|------------|
| ZI. | Particulars        | or the | Research | Guidance:- |

a. Number of scholars awarded / working

| Status  | M. Phil | Ph. D |
|---------|---------|-------|
| Awarded |         |       |
| Working |         |       |

|   | Working  |                       |                              |
|---|--|-----------------------|------------------------------|
|   | (b) Awards, Rewards, Fellowships, Patents if any   | <i>y</i> :            |                              |
|   | (i)  |                       |                              |
|   | (ii)   |                       |                              |
|   | (iii)  |                       |                              |
|   | (iv)   |                       |                              |
| ) | 2. Training courses attended and papers presented: | at Conferences / Semi | inars / Workshop etc (Detail |

22. Training courses attended and papers presented at Conferences / Seminars / Workshop etc., (Details and Proofs to be enclosed wherever necessary)

(a) Refresher Course / Workshops/Training programme (Not less than 10 days):

| Name / Title | Organized by | Duration | Year |
|--------------|--------------|----------|------|
|              |              |          |      |
|              |              |          |      |
|              |              |          |      |

(b) Papers Presented in the Conferences / Seminars (provide details in separate sheet):

International :
National :
State level/Regional :

(c) Invited talks delivered at Conferences / Seminars (provide details in separate sheet):

International :
National :
State level/Regional :

23. Academic Performance Indicator (API) Score, based on Performance Based Appraisal System set out in the UGC Regulations (30.06.2010), 1 st Amendment (2011) and 2<sup>nd</sup> Amendment of UGC Regulation (14.06.2014) and UGC Minimum qualifications for appointment of teachers and other academic staff in Universities and colleges and measures for the maintenance of standards in higher educations (4<sup>th</sup> amendment) regulations 2016, G.O.Ms No: 38 Higher education (UE) Department dated 23.06.2016. This score is mandatory to the cadre of Professor/Associate Professor (Appendix – III of Category II & III– UGC Regulation 2016). The applicant has to submit his/her API scores in the prescribed proforma appended in Annexure –I along with the application.

| 24. | Details of academic v | isits abroad, if | any:        |                  |             |
|-----|-----------------------|------------------|-------------|------------------|-------------|
|     | Country visited       | Duratio          | on of visit | Purpose of visit | Evidence in |
|     |                       | From             | То          |                  | support     |
|     |                       |                  |             |                  |             |
|     |                       |                  |             |                  |             |

25. Administrative Experience, if any: (\*)

|              | 3. Naministrative Experience; if any. |                |            |        |    |                   |        |  |  |
|--------------|---------------------------------------|----------------|------------|--------|----|-------------------|--------|--|--|
| Name of the  | Designation                           | Nature of Post | Nature of  | Period |    | Length of service |        |  |  |
| University / |                                       | Temporary/     | Assignment |        |    |                   |        |  |  |
| College      |                                       | Permanent      |            |        |    |                   |        |  |  |
| _            |                                       |                |            | From   | То | Years             | Months |  |  |
|              |                                       |                |            |        |    |                   |        |  |  |
|              |                                       |                |            |        |    |                   |        |  |  |
|              |                                       |                |            |        |    |                   |        |  |  |
|              |                                       |                |            |        |    |                   |        |  |  |
|              |                                       |                |            |        |    |                   |        |  |  |

26. Name and address of the present employer: (Has the application been routed through proper channel? Enclose a 'NO OBJECTION CERTIFICATE')

| 27. | Name    | and   | address   | of   | three | e pe | rsons | who | are   | not  |
|-----|---------|-------|-----------|------|-------|------|-------|-----|-------|------|
|     | related | to tl | he applic | ant  | but ' | who  | know  | the | appli | cant |
|     | well ar | nd to | whom re   | fere | nces  | may  | be ma | de: |       |      |

| ı |  |
|---|--|
|   |  |
|   |  |

2.

3.

28. Any additional information which the candidate wishes to give in support of his / her application:

#### **DECLARATION**

I hereby declare that the statements made in this application are true to the best of my knowledge and belief. If at any stage it is found that the particulars furnished by me is/are false my candidature / application / appointment, if any may be cancelled.

| Place: |                            |
|--------|----------------------------|
| Date : | Signature of the Applicant |
|        | Name:                      |

# For Government / University / College Staff, etc. (Endorsement by the Principal / Head of the Institution)

FORWARDED to the Registrar, Yogi Vemana University, Kadapa.

| The appli   | icant Dr./M   | r./Ms             |                 |            |       |             |        |              |         | S/     | /D/of |
|-------------|---------------|-------------------|-----------------|------------|-------|-------------|--------|--------------|---------|--------|-------|
|             |               |                   |                 | holds      | a     | permanent   | /      | temporary    | post    | in     | this  |
| University  | y/Institution | . His / her chara | cter, as far as | s known to | me,   | is good and | his /  | her work is  | satisfa | ctory. | The   |
| facts state | ted in the a  | bove applicatio   | n have been     | verified   | and   | found corre | ect, a | s per the 1  | records | with   | this  |
| University  | y/Institution | . This Universit  | y/ Institution  | / Organiz  | zatio | n have no o | bjecti | on to the ca | andidat | ure of | f the |
| applicant   | being consid  | dered for the pos | sition he / she | has applie | ed fo | r.          |        |              |         |        |       |
|             |               |                   |                 |            |       |             |        |              |         |        |       |
|             |               |                   |                 |            |       |             |        |              |         |        |       |
| Place       |               |                   |                 |            |       |             |        |              |         |        |       |
| Trace       | •             |                   |                 | SIGNA      | ΓUR   | E OF THE F  | ORW    | ARDING (     | OFFICE  | ER     |       |
| Date        | :             |                   |                 |            | (     | WITH SEAL   | & Al   | DDRESS)      |         |        |       |



# YOGI VEMANA UNIVERSITY:: KADAPA – 516 003

## FORM OF PARTICUALRS TO BE SUBMITTED BY THE CANDIDATES

[This Form is to be filled in by the Applicant and make  $\boldsymbol{6}$  ( $\boldsymbol{SIX}$ ) Xerox copies of the same and enclose along with the application]

|   |   | bject   | a) Post   | :  |   |
|---|---|---|---|--|---|
| and the mistr                               | tutionj   |   | b) Subject  | :  |   |
|   |   | th address  | :   |  |   |
|   |   | d Years)  | :   | :  |   |
| Specify Congroup in case                    | nmunity (also specify<br>e of BC's)   | y sub   | :   | SC / ST  | / BC / PH   |
|   |   | st degree)  | •   |  |   |
|   | Subject   | Class   |   | Date & Year  | University/Institution  |
|   |   |   | Marks   |  |   |
|   |   |   |   |  |   |
| A./M.Sc./MB/Com./M.Tech.equivalent          |   |   |   |  |   |
| A./B.Sc./BBM/<br>Com./B.Tech.<br>equivalent | /   |   |   |  |   |
|   |   | s Passed:   |   |  |   |
| a. Post doctor                              | al research experien  | ce:   |   |  |   |
| b. Specific are                             | ea of research :  |   |   |  |   |
| c. Awards/rev                               | wards/fellowships if  | any:  |   |  |   |
| Teaching Expe                               | erience (At Universit   | ty level or   | Degree leve   | el):   |   |
| Name of                                     | Name of the   |   |   |  | Total teaching  |
| the Post                                    | Institution where worked  | U   | .G.   | P.G.   | Experience  |
|   |   |   |   |  |   |
|   |   |   |   |  |   |
|   |   |   |   |  |   |
|   | Name of the for commun Date of Birtl Specify Congroup in cas  Qualification: Examination Passed D. Phil. A./M.Sc./MBACom./M.Tech. equivalent A./B.Sc./BBM.Com./B.Tech. equivalent equivalent a. Post doctor b. Specific arc. Awards/rev. Feaching Experiment | Name of the candidate in full with for communication Date of Birth and Age (In complete Specify Community (also specify group in case of BC's)  Qualifications: (Start with higher Examination Subject Passed D.  Phil.  A./M.Sc./MBA/Com./M.Tech. Equivalent A./B.Sc./BBM/Com./B.Tech. Equivalent Details of NET / SLET / SET Exam (enclose certificate)  a. Post doctoral research experien b. Specific area of research can be completed as a contract of the Post Search of the Institution where | Name of the candidate in full with address for communication Date of Birth and Age (In completed Years)  Specify Community (also specify sub group in case of BC's)  Qualifications: (Start with highest degree)  Examination Subject Class Passed D.  Phil. A./M.Sc./MBA/ Com./M.Tech. equivalent A./B.Sc./BBM/ Com./B.Tech. equivalent  Details of NET / SLET / SET Exams Passed: (enclose certificate) a. Post doctoral research experience: b. Specific area of research c. Awards/rewards/fellowships if any:  Feaching Experience (At University level or Name of Name of the Institution where U | Name of the candidate in full with address : for communication Date of Birth and Age (In completed Years) :  Specify Community (also specify sub group in case of BC's)  Qualifications: (Start with highest degree):  Examination Subject Class % of Passed Marks  D.  Phil.  A./M.Sc./MBA/ Com./M.Tech. Equivalent  Details of NET / SLET / SET Exams Passed: (enclose certificate) a. Post doctoral research experience: b. Specific area of research : c. Awards/rewards/fellowships if any:  Teaching Experience (At University level or Degree level Name of Name of the Period with the Post Institution where U.G. | Name of the candidate in full with address: for communication Date of Birth and Age (In completed Years):  Specify Community (also specify sub group in case of BC's)  Qualifications: (Start with highest degree):  Examination Subject Class % of Date & Year Passed D. Phil. A./M.Sc./MBA/ Com./M.Tech. equivalent A./B.Sc./BBM/ Com./B.Tech. equivalent a. Post doctoral research experience: b. Specific area of research: c. Awards/rewards/fellowships if any:  Feaching Experience (At University level or Degree level):  Name of Name of the Period with dates the Post Institution where U.G. P.G. |

| 9. | Research and Publia. Publications: | ications:          |             |                  |
|----|------------------------------------|--------------------|-------------|------------------|
|    |                                    | Details            | Published ( | (Specify number) |
|    |                                    |                    | National    | International    |
|    |                                    | 1. Research Papers |             |                  |

2. Books

3. Book chapters

| <b>h</b> ) | Cor | 1 fore | 1000/ | San | ninars | etc  |
|------------|-----|--------|-------|-----|--------|------|
| (()        | COL | nerei  | ices/ | sen | mnars  | eic. |

|    |                      | Attended | Presented | Organized |
|----|----------------------|----------|-----------|-----------|
| 1. | National             |          |           |           |
| 2. | International        |          |           |           |
| 3. | State level/Regional |          |           |           |

### c) Invited talks

|    |                      | Attended | Presented | Organized |
|----|----------------------|----------|-----------|-----------|
| 4. | National             |          |           |           |
| 5. | International        |          |           |           |
| 6. | State level/Regional |          |           |           |

## 10. Research Guidance (Specify number):

| Details | M.Phil./M.Tech. | Ph.D. |
|---------|-----------------|-------|
| Awarded |                 |       |
| Working |                 |       |

| 11. Research | proje | ects | und | lerta. | ken |
|--------------|-------|------|-----|--------|-----|
|--------------|-------|------|-----|--------|-----|

| a. | Compl | leted | • |
|----|-------|-------|---|
| а. | Comp  | icica |   |

b. Ongoing

## 12. Details of administrative experience:

- 13. API score based on PBAS:
- 14. Any other relevant information:

Station:

Date: SIGNATURE OF THE CANDIDATE