



# PERIYAR UNIVERSITY

NAAC Accredited A++ Grade – State University – NIRF Rank 73, ARIIA Rank 10

SALEM - 636011, TAMIL NADU

SUTHANTHRA THIRUNAL AMUDHA PERUVIZHA



## PROFORMA FOR QUALIFICATION APPROVAL OF ASSISTANT PROFESSOR IN AFFILIATED COLLEGES

1. Name of the College :
2. Name of the Staff :
3. Father/Husband's Name :
4. Name of the Department in Which he/she is now working :
5. Mobile Number :
6. Email ID :
7. The post now held by him/her for which qualification approval is sought :
8. Date of Birth :
9. Mother Tongue :
10. Other Languages Known to read :  
to write :  
to speak :

11. Educational Qualification (From Degree onwards)

S. No	Institutions Studies	Years of Study	Part Time or Full time	Degree or Diploma	Month & Year of Passing	Percentage of Marks with Class	Specialization

12. Date of appointment to the collegiate Service :
13. Date of appointment in the present post :
14. Date of appointment in the present Institution :
15. Details of teaching experience

Name of the College/Institution	Designation	Period		Year	Month	Date
		From	To			

16. Have you passed (i) CSIR, UGC (ii) JRF (UGC) (iii) State Level screening test. If yes furnish the Month and year of passing and a Copy of the Certificates :

I certify that the information furnished above are true and correct to the best of my knowledge and belief. If there is any incorrect or false information having been furnished or that may come to light in due course I bind myself for such action as the University may decide.

Station:

Signature of the Staff

Date :

Specific Recommendations if any

College Seal

Signature of the Principal

**Note:** If the staff is in possession of grade point system (A or B or C or O etc), he/she is request to obtain the equivalent mark from their respective University and enclose the attested Xerox copies of the statement of marks.

**The applicant is requested to enclose the following certificates duly attested**

1. 10<sup>th</sup> and +2 Statement of Marks.
2. UG, PG, M.Phil, Ph.D and NET/ SET
3. Service Certificate.
4. Equivalent Certificate (if necessary)
5. Application Cost Rs.1125/- Demand Draft infavour of The Registrar, Periyar University, Payable at Salem.

<u>Demand Draft Particulars</u>	
Name of the Bank.....	
Branch.....	Amount 1125/-
DDNo.	Date:

To

The Registrar  
Periyar University  
Salem – 636 011.