Shivnagar Vidya Prasarak Mandal’s,

**COLLEGE OF PHARMACY, MALEGAON BK.**

TAL- BARAMATI, DIST- PUNE, PIN- 413115

Tel.No. (02112) 254447.

Email:-copmalegaon@gmail.com

Form No.:

[Latest Passport size Color Photograph]

**APPLICATION FORM**

With reference to the advertisement dated \_\_\_\_\_\_\_\_\_\_\_\_ published in \_\_\_\_\_\_\_\_\_\_\_

I, wish to apply for the post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in the discipline (Branch) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_in **COP**, Malegaon Bk. for the

Academic year 2019-20

**====================================================================**

1) Full Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Surname) (First name) (Middle name)

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(for correspondence)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pin :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) \* Date of Birth : \_\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ (DD/MM/YY)

3) Nationality : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4) \* Caste Category : Open / Reserved (SC, ST, DTNT, OBC, etc.) Specify \_\_\_\_\_\_\_\_\_\_

5) Mother Tongue : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6) Languages known

|  |  |  |  |
| --- | --- | --- | --- |
| Language | Speak | Read | Write |
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|  |  |  |  |

7) \* Academic Qualifications (Starting from S.S.C.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr.No. | Exam.Passed | Passing Year | Board/University | Main Subject | Class, % Marks, No.of Attempts | Remarks  (Rank etc.if any) |
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...2/-

**:: 2 ::**

8) \* Experience

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr.No. | Name of Establishment | Post Held | Period | | Last Pay | Nature of Work |
|  |  |  | From | To |  |  |
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**Total Experience = (Teaching = & Industrial = )**

9)\*For Associate Professor post, : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(please enclose proof PhD or equivalent to Ph.D.)

10) \* Membership of Professional bodies : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11) \* Achievements (Awards, medals, etc.) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12) \* Paper Published/Presented : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Enclose copies)

13) \* Book Published, if any : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14) Areas of Interest : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15) \* Research Experience : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16) \* Minimum salary expected : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

17) Notice period required to join the post, : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

if selected.

18) Other information, if any : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

19) Please specify four areas of your : 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

probable contribution to College

2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that the above information given is true and correct.

Date:- ( Signature of Candidate ) -----------------------------------------------------------------------------------------------------------

**\* Self Attested photo copies of the necessary certificates etc. to be enclosed. Use separate sheet(s) wherever necessary. (Ӽ) Strike out whichever is not applicable.**

**List of required documents enclosed for application :**

1. B. Pharm Marksheet with University Certificate
2. GPAT/GATE Qualified letter, if any.
3. M. Pharm Marksheet with University Certificate
4. Ph.D Awarded Certificate (For Professor, Associate Professor)
5. Caste Certificate
6. Caste Validity Certificate
7. Previous University Approval letter
8. Previous University Approval to Recognition as a PG Teacher
9. Previous University Approval to Recognition as a Ph.D. Guide
10. Experience Certificate
11. Proof justifying document about your experience paper presented etc.

(as applicable under point no. 09,10,11,12,14 & 15)

1. Marriage / Name Changed Certificate (if applicable)
2. Relieving Certificate / Discharge Certificate for previous employer
3. Last salary certificate
4. Latest Passport Sized Photographs in colour
5. Character Certificate
6. PAN Card
7. Adhar Card

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