PERSONAL INFORMATION

- 1. NAME:
- 2. **DESIGINATION:**
- **3. DEPARTMENT:**
- 4. DATE OF JOINING INGOVERNMENT SERVICE:

5. DATE OF JOINING IN THE PRESENT COLLEGE:

6. PHONE AND E-MAIL:

Educational Qualification:

Examination Passed	University or Other Examining Body	Year of Passing	Division /Class	Percentage
UG				
PG				
M.Phil.				
Ph. D.				
NET/SLET				
If any Other				

Research Details:

Degree	Title of the Thesis	University /Institute	Date of Registration	Date of Award
Ph.D.				
Post- Doctorate				

Teaching and Research Experience:

Organization with Address	Type UG/PG	Designation	From	То	Nature of Experience

Co-Curricular, Extension and Professional Development Related Activities (BOS/ NCC/NSS/RED CROSS/ ROVERS RANGERS/ if any administrative position) (FROM 2016-17 ONWARDS)

Name of Activity	Period (Academic Session)	Post

Research Papers in SCOPUS/ WOS/ICI/ Peer- Reviewed or UGC CARElisted Journals (FROM 2016-17 ON WARDS)

Sl. No.	Title of the Article/ Paper	Name of the journal	Vol. No. & PP / Month and Year	Whether you are the main Author And / or No. of Coauthors	ISSN No.	UGC Journal No./ Impact Factor and Link to verify

Research guidance of Ph.D./ M.Phil./PG Project Guidance (FROM 2016-17 ON WARDS)

Name of the Scholar	Title of the Thesis/ Report	Submitted/ Awarded (Pls. Specify)	Name of the University	Month and Year

Refresher Programme/ OrientationProgramme/ FDP/any training programme attened (Both Online or Face to Face) during (FROM 2016-17 ON WARDS)

Name of the Programme	Title of the Programme	Duration (from and to)	Name of the University/ College Conducted	Year

Awards/Fellowship: College/ State /Regional/ National / International (FROM 2016-17 ON WARDS)

Name of the Award / Fellowship	Sponsoring Agency	Date	National / International/
			Regional /
			College level

Invited Lectures / Resource Person/ Paper Presentation in Seminars/ Conferences (FROM 2016-17 ON WARDS)

Name of the Programme	Name of Organising Agency	International (Abroad)/International (within Country)/ National/ State/University level	Title of the Paper / Talk	Duration (Dates of Event)

List of Webnier / E-Seminar participated (FROM 2016-17 ON WARDS)

Name of the Webnier	Name of Organising Agency	International (Abroad) / International (within Country) / National / State / University level	Title of the Paper / Talk	Duration (Dates of Event)

DECLARATION

I certify that the information provided in the duly filled proforma is correct as per records enclosed.

Date: Place:

(Signature) (NAME -----)