



Gautam Buddha University

Gautam Budh Nagar- (U.P.)

Application Form for Guest Faculty

Advertisement No: GBU/Admn/2020/02

Photograph

IMPORTANT

:-

To be filled in by the Candidate

School Name

Department..... Specialization.....

1. Name (in Block letters) _____
2. Father's/Husband's Name _____
3. Date of Birth _____
4. Category (SC/ST/OBC/UR.)
(Pl. enclose certificate) _____
5. Gender (Male/Female) _____
6. Marital Status _____
7. Highest Qualification _____
9. Mobile No. _____
10. E-mail ID _____
9. Postal Address _____

11. Academic Qualifications Record:

S. No.	Exam	Board/ University	Year of Passing	% Marks	Div./Grade
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

(Please enclose self attested copies of certificates for all above mentioned academic qualifications)

12. **Experience:**

S. No.	Name of the University/Institute	Designation	Teaching Experience		Total (Year & Months)
			From	To	
1					
2					
3					
4					
5					

(Please enclose copies of all above mentioned certificates, if any)

13. Publications:

i) Research paper : _____

ii) Patents/Copyrights : _____

14. API score as per UGC. : _____

15. No. of Ph.D supervised : _____

16. Award & recognitions at National/International level : _____

17. Other information not covered elsewhere (Please attach a sheet, if required)

DECLARATION TO BE SIGNED BY THE CANDIDATE

I hereby declare that the information given above is correct to the best of my knowledge and belief. I also declare that in case an opportunity is given, to serve GBU, I shall join the University, within days. I also declare that all material information has been disclosed. I also understand that if any information provided above is found false or inaccurate my candidature shall be treated as cancelled and necessary action may be taken against me as per University rules.

Dated:.....

(Signature)

Place:.....

Name:.....