



G. NARAYANAMMA INSTITUTE OF TECHNOLOGY & SCIENCE
AUTONOMOUS (for Women)
Shaikpet, Hyderabad -500 104

**APPLICATION FORM FOR RECRUITMENT OF TEACHING STAFF –
PROFESSORS / ASSOCIATE PROFESSORS**

Affix latest
Colour Passport
Size Photograph

Post to which applied	Associate Professor	Department	
Faculty Registration Number			
Advt. Number			
Name of the Candidate		Surname	
Father's Name		Gender	
Father's Occupation		Present Designation	
Reservation		Physically Handicapped	
Date of Birth		Place of Birth	
District of Birth		State of Birth	
Address			
House No.		Village	
City		District	
State		Pin-code	
Mobile Number		Office number if any?	
E-mail			

Educational Qualifications details:

Examinations	Name of the Board / University	Place (Village / Town)	Year of passing	Percentage of marks obtained	Division/ Class/ Grade	Specialization	Proof (Enclose & Page No.)
High School/ Matric							
Intermediate							
Under Graduate							
Post Graduate							
M. Phil							
Ph.D.							
Other examinations if any							

Employment details:

S.No	Name & Address of Institute	Post Held	Scale of Pay (Please Specify the Range)	From Date	To Date	Total Period	Basic Pay	Gross Pay	Job Type (Regular, Ratified, Adhoc/Part time)	Proof (Enclose & Page No.)

Period of teaching experience:

Classes	Years		Total years	Proof (Enclose & Page No.)
	From	To		
P.G. Classes				
U.G Classes				
Research experience excluding years spent in M.Phil/Ph.D (in years)				

Academic Staff College Orientation / Refresher Course				
Attended				
Name of the Course / Summer School	Place	Duration	Sponsoring Agency	Proof (Enclose & Page No.)
Conducted/Organized:				
Name of the Course / Summer School	Place	Duration	Sponsoring Agency	Proof (Enclose & Page No.)

Publications of peer-reviewed or UGC list of Journals									
Sl. No.	Title with page nos.	Journal name with month & Year of publications	ISSN / ISBN No.	Whether peer reviewed Y/N	Sl. No. of the UGC listed. Journal with year	No. of Co-authors	Whether you are the main author	International or National or State level publisher	Proof (Enclose & Page No.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Evidence of actively involved in guiding of Ph.D. Scholars.									
Sl. No	Name of the Student/Scholar	Hall Ticket No.					Proof (Enclose & Page No.)		
Major or minor research project sponsored by National or International agencies.									
Sl. No	Title of the Research Project	Org. / Agency Name	Minor or Major	Period (From to)	Grant / Amount Mobilized (Rs. in Lakh)	National / International	Ongoing/ Completed	Proof (Enclose & Page No.)	

Calculation of Credit Points (As per Annexure - IV - Calculation of 360° degree)

Name	
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Present Position	
Academic Year	
Teaching- Process	

A. Teaching Process (Max. Points 25)

S. No.	Semester (I/II-Acad. Year)	Course Code/ Name	No. of Scheduled Classes	No. of actually held classes	Point	Enclosure no.
1						
2						

B. Students' feedback (Max. Points 25)

S. No.	Semester (I/II-Acad. Year)	Course Code/ Name	Average Student feedback on the scale of 25	Enclosure no.
1				
2				

C. Departmental Activities (Max. Points 20)

S. No.	Semester (I/II-Acad. Year)	Activity	Credit Point	Criteria	Enclosure no.
1					
2					

D. Institute Activities (Max. Points 10)

S. No.	Semester (I/II-Acad. Year)	Activity	Credit Point	Criteria	Enclosure no.
1					
2					

E. ACR maintained at institute level (Max. Points 10)

S. No.	Year	Activity	Credit Point	Criteria	Enclosure no.
1					
2					

F. Contribution to Society (Max. Points 10)

S. No.	Semester (I/II-Acad. Year)	Activity	Credit Point	Criteria	Enclosure no.
1					
2					

Summary

Summary	Academic Year	Academic Year	Academic Year
	1	2	3
A. Teaching Process (Max. Points 25)			
B. Students' feedback (Max. Points 25)			
C. Departmental Activities (Max. Points 20)			
D. Institute Activities (Max. Points 10)			
E. ACR (Max. Points 10)			
F. Contribution to Society (Max. Points 10)			
Total (Max. Points 100)			
Total on 10 Point scale			

STUDENT'S FEEDBACK FORM

(To be used by institutions)

Academic Year:		Name of the Faculty	
Course		Semester	
		Date of the feedback	

For getting filled in through student

S. No.	Description	Very Poor	Poor	Good	Very Good	Excellent
		(1)	(2)	(3)	(4)	(5)
1	Has the Teacher covered entire Syllabus as prescribed by University/ College/ Board?					
2	Has the Teacher covered relevant topics beyond syllabus					
3	Effectiveness of Teacher in terms of:					
	(a) Technical content/course content					
	(b) Communication skills					
	(c) Use of teaching aids					
4	Pace on which contents were covered					
5	Motivation and inspiration for students to learn					
6	Support for the development of Students' skill					
	(i) Practical demonstration					
	(ii) Hands on training					
7	Clarity of expectations of students Progress					
8	Feedback provided on Students'					
9	Willingness to offer help and advice to students.					
	Total					

OTHER RELEVANT INFORMATION

Please give details of any other credential, significant contributions, awards received etc. not mentioned Earlier

S. No	Details (mention year, value etc. wherever relevant)

List of Enclosures: *(Please attach, copies of certificates, sanction orders, papers etc. wherever necessary)*

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

I certify that the information provided is correct as per records available with the University and / or documents enclosed along with the duly filled proforma.

Signature of the Teacher
with designation

Signature of the Head of
the Department

Signature of the Principal

Place:

Date: