

# UTTARAKHAND OPEN UNIVERSITY

(Established under Act 23, 2005)

Teenpani Bypass Road, Near Transport Nagar, Haldwani (Nainital)-263139 UTTARAKHAND

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**Advertisement No. UOU/R3/004/2018, dated 31 October, 2018**

## Application Form for Academic Consultants

Paste your recent  
passport size  
Photograph here

1. Academic Consultant: **Subject** -----

2. Personal Details:

a) Name (in capital letters)	Mr./Ms./ Mrs./Dr.	First Name			Middle Name	Surname		
b) Date of Birth	Day	Month	Year	Age as on date of advertisement	Age	Months		
c) Father's Name								
d) Mother's Name								
e) Nationality								
f) Gender								
g) Religion								
h) 1- Community/Category (GEN/SC/ST/OBC)								
2- Domicile of Uttarakhand		YES/NO				Sl. No of proof enclosed		
i) Marital Status								
j) Present Postal Address with PIN Code								
k) E-mail:								
l) Mobile No:								
m) Landline with STD Code								
n) Fax								

3 Educational Qualifications (attached additional pages if required)									
Name of Qualification	Name of the Course	Name of the Board/ University	Month & Year Passed	Division	% of marks	Aggregate Marks	CGPA (If grading is application)	Subject Studies	Sl No. of proof enclosed
10 <sup>th</sup> class/ Equivalent									
12 <sup>th</sup> Class/ Equivalent									
Bachelor' Degree									
B.Ed./Other Bachelor Degree									
Master's Degree									
M.Ed./Other Master Degree									
M. Phil/ Equivalent									
Ph.D.									
Indicate whether Ph.D. degree has been Awarded: Yes/No									
If awarded whether the Ph. D. degree is in accordance with UGC regulation 2009 (If yes please submit proof of evidence)									Sl. No. of Proof enclose
Yes/No									
In case of Ph.D. degree Awarded please submit the followings			Date of Registration		Date of Submission		Date of Notification		Sl. No. of Proof enclose
NET UGC/CSIR For lectureship if any					Subject	Roll No	Year		
Any other Exam passed equivalent to NET (SLET/SET etc.)									



4. Chronological List of Experiences (including current position /Employment)							
Designation & Pay Band	Name& Address of the Employment	Nature of employment (Permanent/ Temporary/ Contract/ Others (Specify))	Period of Experience		No. of Years/ Months (as on day of adv.)	Nature of Work/Duties	Sl. No. of proof enclosed
			Date From	Date to			

5. Total Period of Experience (Please ensure that the period of Teaching & Research experiences claimed do not overlap)			Sl. No. of proof enclosed
a) Teaching	No of Years	No. of Months	
i) Under Graduation Level			
II) Graduation Level			
(iii) Post Graduation Level			
b) Post- Doctoral: Teaching/ Research			
c) Research Experience			
d) Other Experience, if any			

6. Publications, if any, in last five years (Mention here only numbers. The details of copies of reprint to be enclosed- for teaching posts only)					
Publications	Published (No.)	ISBN/ ISSN No.	Accepted in print (No.)	Communicated (other than Published/ Accepted)	Sl No. of proof enclosed
Books					
Books (As co-author)					
Books(edited)					
Chapter in books					
Research Paper					
Articles in referred journals					
Conference Proceedings					
Other Publications/Patents (Specify)					

7. Seminars/ Conferences etc.			
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. <i>Organised</i>	In India (No.)	In Abroad (No.)	Sl. No. of Proof enclosed
Seminars/Conferences/Workshops/Symposiums/Training Programmes etc. <i>Participated as Paper Contributor/ Presentator/Discussant</i>			
Seminars/Conferences/ Workshops/Symposiums/ Training Programmes etc. <i>Attendant</i>			

8. Present Position					
Designation	Name of the Institution	Nature of Institution (Govt./ Autonomous Body/ Self Financing/ Private/ NGO/ Others (specify))	Basic Pay & Pay Band	Gross Pay/ Total Salary P.M. (in Rs.)	Sl. No. of proof enclosed

**Declaration**

I-----Son/Daughter of-----hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the selection committee and Board of Management meetings, my candidature /appointment may be cancelled by the University.

Signature of the Applicant

Name (in block letters):

(Application not signed by the candidate is liable to be rejected.)

Date