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DR. B.R. AMBEDKAR CENTER FOR BIOMEDICAL RESEARCH UNIVERSITY OF DELHI, DELHI-110 007

APPLICATION FORM FOR PANEL FOR THE POST OF ASSISTANT PROFESSORS(AD-HOC) FOR THREE BIOMEDICAL SCIENCE COLLEGES OF DELHI UNIVERSITY, 2016-2017

1.	Name (in block letter) Mr./Ms./Dr.	:	
2.	Fathers/Husbands Name	:	
3.	Date of Birth	:	
1	Catagory (Canaral/Sahadulad Casta)	ē	
4.	Category (General/Scheduled Caste/	•	
	Scheduled Tribe/OBC/Physically		
	Handicapped? (if yes, please attach		
	a certificate in support thereof)		
	.,		
5.	Present Local Address	:	
(on	which intimation can be sent)		
6.	Telephone Number	:	Landline
			E-mail:
			Mob. No
7.	Permanent Address	:	

8. Academic Qualifications (Attach copies of Certificates)

Examination	Name of	Year	Name of	School /	Subjects	% of	Division
Passed	Degree		Board /	College	-	Marks	
			University	Attended			
Graduation							
Post-Graduation							
r ost-Graduation							
M.Phil							
Details of Ph.D. (w	hichever is	annlicat	1/e)				
Details of 1 11.D. (W	inchevel is	иррисах	,,,,,,				
a. Thesis submitt and subject in	ed (DD/MM/	YYY)					
and subject in	WINCH FILD.	is dolle					
b. Defended (DD/M	IM/YYY)						
c. Degree Awarded	(DD/MM/YY	Y) &					
Name of Awardin	ng University						
			•				
Any other							
Qualifications							

9.	Have you qualified NET or its equivalent?	:	
	(if yes, indicate the month & year of Exam.)		

Attach Certificates as a Proof. If result is attached, kindly highlight roll no.

10. Mention your area	(s) of specialization	at the		
M.Sc. level		:		
M.Phil. level		:		
Ph.D. level		:		
11. Please specify the	Topic of the Ph.D.	Thesis (if applicable	e) :	
12. Teaching Experien	ce (at University/Co	ollege level)		
Name of College /	Designation	Nature of	Class taught	Period
University	20019.1.4.1011	appointment	(Hons / Pass)	. 5.1.5 4
		(Ad-hoc/	(11011071 400)	
		Temporary)		
		. 3,		
13. Total Teaching Exp	nerience		Year	Months

14. Publications (Indicate numbers only)	
a. Published	
b. Communicated	
c. Patents	
15. Any other information :	
Date :	Signature of the Applicant
DECLARATION	
I declare that the information given in this application is correct and nothing has been suppressed.	to the best of my knowledge and belie
Date :	Signature of the Applicant
Note: Please enclose the following documents: i. Self attested photocopy of the Mark sheets of Gradua ii. Self attested photocopy of Ph.D Degree / Result. iii. Evidence of passing the NET or equivalent Examinati	