

**BABA FARID UNIVERSITY OF HEALTH SCIENCES,
FARIDKOT- 151203**

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College Teacher's Return

Note: This form must be submitted within ONE MONTH from the date of appointment

Name of Teacher _____
 Father's Name _____
 Date of Birth (as recorded in Matric/Hr. Secondary Certificate) _____
 Male/Female _____ Married/ Unmarried _____
 Registration No. & Date (with respective State/ Central Council) _____
 Present Home Address _____

ACADEMIC QUALIFICATIONS

Name of Exam	University/Board	Speciality	Year of passing	Marks/Class obtained
MBBS/ BDS/ BAMS/ BHMS/ BSc(Nsg)/ B.Ph.T.				
MD/ MS/ MDS/ MD(Ay)/ MPT/ MSc(Nsg)				
Ph.D.				
DM/ MCh/ DNB				
Any other				

Note: Attach biodata along with attested photocopies of certificates/ degrees

Research papers or any publications etc. Please attach separate sheet.

PREVIOUS TEACHING EXPERIENCE IN AFFILIATED COLLEGES

Name of College	Period		Post held	Name of course taught	Name of Univ. to which the college is affiliated
	From (dd/mm/yy)	To (dd/mm/yy)			

Designation _____ Subject of teaching for which approval is sought _____

Pay & Allowances:

- | | |
|-----------------------|-----------|
| 1. Scale of pay | Rs. _____ |
| 2. Pay drawn | Rs. _____ |
| 3. Dearness allowance | Rs. _____ |
| 4. Other allowance | Rs. _____ |

Date of appointment in the present post _____

Nature of appointment: Adhoc/Part- time/ Temporary/Permanent

In case of temporary appointment, reason thereof may be mentioned

If on probation, the period of probation:

If appointment already approved, quote University Letter No. & date and the name of the college where approved:

Reason for leaving the said College:

I declare that I have not been disqualified by any University for appointment as a teacher in an affiliated college and that I have obtained a relieving chit from my previous employers.

Designation _____ Signature of the teacher _____

Certified that I have seen the original Degrees/Diplomas mentioned above. All the particulars given in this statement are correct.

Dated: _____

**Principal
(Seal of the College)**

(FOR UNIVERSITY OFFICE USE ONLY)

1. Name
2. Designation
3. Attested photocopies of the degrees/ diplomas checked
4. Qualifications required for the post according to respective council
5. Experience required for appointment/
promotion to the post
6. If already approved, previous reference

Remarks of Executive Assistant

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1. Whether he/she fulfils the required qualifications
 2. Whether he/she has requisite experience
 3. Subject for which qualified
 4. Is he/she getting the requisite grade/salary
 5. Whether VC's nominee & subject experts were associated with the Selection Committee

Remarks of Dy. Registrar (C)

Registrar's recommendations

V.C.'s orders