

Baba Farid University Teacher Particular Performa

1. Name :
2. Age/Sex :
3. Permanent Address :
4. Tel/No. :
5. Registration No. :
6. Name of the State Council from where registered:
7. Present Designation :
Date from when held :
(Ps attach copy of appointment letter)
8. Nature of appointment Permanent/Temporary/Adhoc/Honorary/Part Time
9. Whether belongs to O.G./SC/ST/OBC/Ex-Servicemen/Others
10. QUALIFICATIONS:

Please Paste
recent colour
photograph here.

Ps. Attach photocopies of Certificates/degrees etc.

Qualification/Univ./Board from which obtained	Dt. of passings/% of marks obtained	Remarks
Any Additional Qualification/talent/skill		

11. Previous Appointment held (In chronological order with teaching experience acquired therof)

Appointment as / name address of institution from where acquired	From – To (dates) / Total duration Years/Months.	Type of experience Teaching (class) / research etc.	Remarks of Inspectors Eligible / Ineligible

12. Any special Achievements :

13. Research work/publications etc. :

Date :

Place :

Signature :

Name :

Designation :

Verification

i) It is certified that the above statement given by me is authentic, true and correct to the best of my knowledge and belief and that nothing has been concealed.

ii) I am not working in any other College and State or outside in any capacity full time / part time.

Signature :

Date :