

ADITI MAHAVIDALAYA

(UNIVERSITY OF DELHI)

BAWANA, DELHI-110039

**FORM OF APPLICATION OF RECOGNITION AS A TEACHER OF THE
UNIVERSITY UNDER STATUE 18(2)**

1. Name of the teacher for whom Recognition is sought : _____
2. Date of birth : _____
3. Whether belong to SC/ST/OBC Ph Category : _____
4. Nature of Post against which Appointment held : _____

5. Details of Academic Qualification :

S.No.	Degree	Subject	Division of Marks (with rank,if any)	Year	University
1.	B.Sc				
2.	M.Sc				
3.	M.Phil				
4.	Ph.D.				
5.	UGC-NET Exam				
6.	Any other higher or research work				

6. List of Research works or other Published works, if any (attach a separate sheet, if needed) : _____
7. Teaching experience in recognized institutions prior to appointment to the post noted in col. No -8 (attach a separate sheet ,if needed)

Name (s) of institution (s)	Class taught with dates		Total
	Degree	Post Graduate	

8. Post to which appointed (Lecturer/part time Lecturer) : _____
9. Date of Appointment (Joining) In the college : _____
10. Subject in which recognition is Sought (Nature of recognition) : _____
11. Exact period for which recognition Is sought and classes to be taught : _____
12. Relaxation in qualification etc if any (Specific reason to for relaxation) : _____
13. Date of meeting of the college Selection Committee which recommended the Appointment : _____
14. Date of Governing body which approved The recommendation of the Selection Committee : _____
15. Date of Reappointment and period for which Appointment has been extended : _____
16. Date of resolution of the Executive council : _____
17. Date of meeting of College Selection Committee which recommended the Reappointment of extension. : _____

18. Date of meeting of Governing Body : _____
Which approved the recommendations
Of the Selection Committee

Signature of Teacher

Name : _____

Date :

Encl :

Signature of Principal