

PROFORMA 'D'



एस.एन.डी.टी. महिला विद्यापीठ, मुंबई – 20.

SNDT WOMEN'S UNIVERSITY

1 N.T. Road, Churchgate, Mumbai – 400 020.

PROFORMA FOR EXISTING MEMBERS OF BOARDS OF STUDIES FOR FILLING THE CASUAL VACANCIES OF CHAIRPERSONS THAT HAVE OCCURED BEFORE THE EXPIRY OF NORMAL TERM ON FEW BOARDS OF STUDIES IN CONCERNED SUBJECT OR GROUP OF SUBJECTS, BY THE STANDING COMMITTEE (u/s 40(2)(d)(i) and 70(1) of the M.P.U. Act, 2016)

To,
The Registrar,
SNDT Women's University,
1, Nathibai Thackersey Road,
Mumbai – 400 020.

Sir,

I am submitting herewith the requisite information for filling the casual vacancy of Chairperson that has occurred on the Board of Studies in _____ before the expiry of the normal term under Section 40(2)(d)(i) of the Maharashtra Public Universities Act, 2016.

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1. Name of the existing member of the Board of Studies in full (Block letters) : _____
(Surname) (First Name) (Middle Name)
 2. Name of the Board of Studies : _____
 3. Present Residential Address : _____

_____ Pin code _____
 - Phone No. : Res.: _____ Off.: _____
Mob. : _____
E mail : _____
 4. Name and address of the member of the Board of Studies : _____

 5. Department / Level (Eg. Sociology / UG / PG) (Please attach a copy of appointment letter) : _____

6. Educational Qualifications : _____

7. Whether Full Time / Part Time/ Visiting : _____
8. Whether appointment is approved by the University. : _____
 Yes / No
 (If yes, enclose a copy of approval letter)
9. Teaching Experience : _____
 Level (UG/PG) If UG nature of component (DC/AC etc.) No. of years of teaching experience
10. Whether recognised post-graduate teacher. If so date of recognition : _____
 (Pl. attach letter of recognition)
11. Whether a recognised Ph.D. Guide. If so date of recognition : _____
 (Pl. attach letter of recognition)
12. Number of Ph.D. students who have been awarded Ph.D. Degree under your supervision : _____
 (Pl. attach the University Notification of Ph.D.)
13. Name and date of publication of text-books and reference books : _____
 (Pl. attach the proof of publication)
14. Number of research papers and dates of their publication in peer reviewed journal as a first corresponding author : _____
 (Pl. provide the information on a separate sheet separately)
15. Total experience of work related to University Examinations : i.. As Paper setter _____
 ii. As Examiner _____
 iii. As Moderator _____
 iv. As Chairperson/ Co-Ordinator _____
 at University Examinations
16. Year and date of obtaining Ph.D. and the University : _____

Declaration by the member of the Board of Studies

I hereby declare that, the information furnished by me as above is true and correct to the best of my knowledge and belief.

Place :

Date :

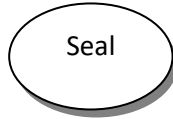
 (Signature)

**Declaration by the concerned Principal of the College /
Head of the University Department**

I certify that the above information has been checked by me and is found to be correct and the said member of the Board of Studies possesses the above qualifications and teaching experience / the experience related to University Examination work and the publication to his / her credit.

Place : _____

Date : _____



(Signature of the Principal of the
College / Head of University Department)

NOTE : -

- Photocopies of the relevant documents duly attested should be attached with the proforma.