Application No.	:
	in her the Heisensite Office)



SHREEMATI NATHIBAI DAMODAR THACKERSEY WOMEN'S **UNIVERSITY,**1, Nathibai Thackersey Road, Mumbai - 400 020.

ADVERTISEMENT NO. 02/2021 DATED 15.04.2021 APPLICATION FOR THE (UNAIDED) POST OF PROFESSOR

To,

Affix latest passport size photograph

	Γ. Wom	(Addl. Cha en's Univer 020	O . ,					with self attested.
POST A	APPLII	ED FOR:_						
Details	of Dem	and Draft : I	DD. No		Date	:/	/	
Amou	ınt Rs		Nam	ne of Bank :				
1.	Name (IN BL	in full Mr./N OCK LETTE	Mrs./Miss _ ERS)	(Surname)	(First Nam	ne) (Fat	her's / Husba	and's Name)
2.								
		OCK LETTE	EKS)					
					PIN CC	DE NO		
3.	Teleph	none No. (if	any):					
	(Office	e):		(Resi.):				
	Mobile	e No.:		Email Id :				
4.	Person	nal Details:						
	Age Date of Birth / Single of Children, if any				National	ionality Specify the caste if belong to SC/ST/DT-NT /OBC w support of caste certifica		
5.	Langu	age known (Please give	e details and ✓ in a	ppropriate	columns)		
	Mothe	r-tongue :				Read	Write	Speak
	Other	languages	1. 2.					
			3.					

6. Education of	ıualificat	ion beg	innin,	g with S.S	.C. / H.S.C. or equ	uivalent	Examina	tion:	
Examination passed	Class	Percen	tage	Year of passing	Name of Boar University	Name of Board / Medi University throu which studi			oject/s of cialization
							_		
7. Teaching E.	xperienc			// C C_11	S. L. Armaha	· C:			
Name of Insti	itution	time	part ng, m	on (if full t-time or tention of	Subject taught s level (i.e. Jr. C Graduate/Post	College/ Graduate		Period From	
		san	ne be	made)	level etc.)				
8. Any other Ex	<u>cperience</u>	;						Peri	~A
Name of Org	ganizatio	n	Designation		Nature of Work		Fr	om	То
9. Please give by and name of			f The	sis/Dissert	ation approved/su	ıbmitted	for M.Ph	nil., Ph	ı.D., etc.
Title of Thesi	s/Dissert	tation		Name of	f the Guide	Year	of approv	al/sub	mission
			<u> </u>						
			+						

	-		(other than research undertaken during led)
Pub	olications (if list is long	same be appended)	
)Art	icles:		
)Res	search Papers:		
)Boo	oks etc. :		
		•	elevant and important by the candidate
PR	ESENT POSITION :		
(a)	Name of the institution	or	
	organization where wo	rking	
(b)	Designation :		
(c)	Nature of appointment	:	
(d)	Date of appointment:		
(e)	Date of Confirmation :		
(f)	Salary (Attach last pay	certificate, if any)	
	Present Salary Scale/Pa	ay Band with AGP:	
	Present Basic Salary	Rs	Grade : - Rs
	Allowance	Rs	plus
			Admissible Allowances
	Total emoluments	Rs	allowances Rs
	Puth (a) Add buth PR (a) (b) (c) (d) (e)	Publications (if list is long and particles : (a) Name of the institution organization where wo (b) Designation : (b) Designation : (c) Nature of appointment (Temporary / Permane (d) Date of Confirmation : (e) Date of Confirmation : (f) Salary (Attach last pay Present Salary Scale/Pay Present Basic Salary	Publications (if list is long same be appended)) Articles: (Research Papers:) Books etc.: Additional remarks, if any, on any item considered r but not included elsewhere. PRESENT POSITION: (a) Name of the institution or

	Name	Full address
1)		
2)		
6. Registration	No. given by the Employment e	
6. Registration 2	No. given by the Employment en ny relative/s employed at the Usity, if so give name of relative	xchange, if registered with them
6. Registration 7. Have you an with Univers he/she is wor	No. given by the Employment en ny relative/s employed at the Usity, if so give name of relative	xchange, if registered with them
6. Registration 7. Have you an with University he/she is wor	No. given by the Employment entry relative/s employed at the Usity, if so give name of relative/king	Iniversity or any of the Institutions concerve, name of the Institution/Department with
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6. Registration 7. Have you and with University he/she is work particulars of the second seco	No. given by the Employment entry relative/s employed at the Usity, if so give name of relative/sking f testimonials enclosed:	Iniversity or any of the Institutions concerve, name of the Institution/Department will
6. Registration 7. Have you and with University he/she is work particulars of the second seco	No. given by the Employment entry relative/s employed at the Usity, if so give name of relative/sking f testimonials enclosed:	Iniversity or any of the Institutions concerve, name of the Institution/Department will

14. Name and address of two persons other than relatives, to whom reference can be made about work and character of the applicant (enclosed copies of certificate from them. One of

DECLARATION

I, hereby, declare that, all information submitted in this application and in its accompaniments is true, complete and correct to the best of my knowledge and belief. I accept that, in the event of any information being found false, incomplete, or incorrect, my candidature / appointment is liable to be cancelled / terminated at any stage. I further understand that no cognizance shall be taken of any request for withdrawal of my application. I have read carefully all instructions given in Advt. No. 02/2021 dated 15.04.2021 on the website of the University sndt.ac.in.

Place : Mumbai Date :	
	Name & Signature of the Candidate:
Recommendation	
To, The Registrar (Addl. Charge), S.N.D.T. Women's University, Mumbai -20	
Sir,	
I am forwarding an application of Shri./Smt.	working in
as	_ as a duly recommended.
	Yours faithfully,
	(Name & Signature of Employer) Seal :
Place : Mumbai	
Date:	

DECLARATION OF SMALL FAMILY

FORM - 'A'

(See Rule - 4)

nat I have filled	my application	n for the Po	C			
				as	per	the
dvertisement No.					-	
hich No. of childre	n born after 28 th	¹ March, 2005	is	(Mention	
	•	_				
f h	5.04.2021. have (which No. of children f birth, if any) Date of am aware that, if a	5.04.2021. have (Number) living which No. of children born after 28th f birth, if any) Date of Birth of children am aware that, if any total No. of hildren born after 28th March, 2006,	5.04.2021. have (Number) living children as ownich No. of children born after 28th March, 2005 of birth, if any) Date of Birth of children who born at am aware that, if any total No. of living children hildren born after 28th March, 2006, I am liable to	5.04.2021. have (Number) living children as on today which No. of children born after 28th March, 2005 is f birth, if any) Date of Birth of children who born after 28th am aware that, if any total No. of living children are moshildren born after 28th March, 2006, I am liable to be disquared.	5.04.2021. have (Number) living children as on today which No. of children born after 28 th March, 2005 is (f birth, if any) Date of Birth of children who born after 28th March, 2 am aware that, if any total No. of living children are more than t hildren born after 28 th March, 2006, I am liable to be disqualified for	have (Number) living children as on today which No. of children born after 28th March, 2005 is (Mention of birth, if any) Date of Birth of children who born after 28th March, 2005. am aware that, if any total No. of living children are more than two due hildren born after 28th March, 2006, I am liable to be disqualified for the same

FORMAT FOR NO OBJECTION CERTIFICATE (To be typed on Employers letterhead)

TO WHOMSOEVER IT MAY CONCERN

Certified that Shri/Smt./Kum	, working as
(Designation)	is a confirmed employee of this (Organization
name)	This office has NO OBJECTION
in his / her applying for the post of	at the S.N.D.T. Women's
University, Mumbai in response to the Adve	ertisement No. 02 of 2021 in newspaper Indian
Express/ Loksatta dated 15.04.2021 and t	to appear for interview (if called). There is no
vigilance/disciplinary case either pending or	contemplated against him/her.
	Signature of Head of the Department/ Forwarding Authority.
Place :	
Date :	

S.N.D.T. WOMEN'S UNIVERSITY, MUMBAI

Statement showi	ng particulars	of applican	t Name:									
					Advertisement No. 02/2021 dated 15.04.2021							
Name &	Date of	l I	Academic Q	ualification			No. of Publications			No. of State/	No. of	
Correspondence	Birth		T	T		`	nth/Days)			T	National Level	National/
Address of the		Degree	Year of	%/	Div./	Teaching	Admin	State	National	International	Award	International/
Applicant with		Awarded	Passing	CGPA	Grade							Seminars/
Contact No. &												Conferences
Email ID												Attended
1	2	3	4	5	6	7	8	9	10	11	12	13
								1. Articles	1. Articles	1. Articles	State Total	International
											Award	Seminar :
												Conference:
	Age as on							2. Research Paper	2. Research Paper	2. Research Paper		Total:
	08.04.2021										National	National:
								3. Books	3. Books	3. Books	Total Award	Seminar:
												Conference:
												Total:

I hereby declare that all the entries made by me are true to the best of my knowledge and belief. If anything is found false at any stage, my candidature for the Post of Principal/Professor/Assistant Professor may be cancelled without assigning any reason there for.

Date:	Signature of Applicant :
Place :	Name of Applicant :