

## UGC-HUMAN RESOURCE DEVELOPMENT CENTRE **GURU NANAK DEV UNIVERSITY, AMRITSAR**

*(Established by the State Legislature Act No.21 of 1969)* Accredited at "A" grade level by NAAC and awarded "University with Potential for Excellence" status by UGC

## **Application Form for Orientation Programme**

## Website: www.hrdcgndu.org, Email: hrdcgndu@yahoo.com, hrdcgndu@gmail.com Phone No.: 0183-2258802-09 & 2450601-14 Extn: 3161, 0183-2258961(Direct), Fax: 0183-2258961

Please read the instructions before filling in this form:

(a) Incomplete form is liable to be rejected outrightly.

Centre, Guru Nanak Dev University, Amritsar - 143005.

- (b) This form must be forwarded through proper channel.
- (c) Strike out which is not applicable.
- (d) Please consult UGC guidelines pertaining to these courses before filling the form.

(e) Application should be addressed to the Director, UGC-Human Resource Development

Paste your recent passport size photograph here

- (f) It is mandatory to produce relieving letter from the competent authority of your Institute/College at the time of registration.
- (g) Part-time/Adhoc/Contract teachers who have been teaching for atleast three academic sessions in an institution which has been affiliated to a University for atleast two years may be permitted to participate in the Orientation Programme to enhance their skills.
- (h) A demand draft of Rs.1000/- in favour of the Registrar, Guru Nanak Dev University, Amritsar as registration fee (non-refundable) payable at Amritsar has to be attached with the application form.
- (i) Teachers of colleges/institutes which yet do not come within the purview of section 12(B) but have been affiliated to a University for atleast two years are eligible to participate in the Programmes, but they will not be paid TA/DA and other allowances for attending this course.

## Orientation Programme No.\_\_\_\_\_from\_\_\_\_\_to\_\_\_\_\_to\_\_\_\_\_

1. Name: Dr./Mr./Miss/Mrs.(In Capital letters): 2. Designation:

- 3. Date of Birth: \_\_\_\_\_Sex: Male/Female/Transgender: \_\_\_\_\_
- 4. Religion :
- 5. Category: SC/ST/OBC/General or Physically/Visually Challenged\_\_\_\_\_
- 6. (a) Address of the Institute: \_\_\_\_\_
  - (b) Address for Correspondence: \_\_\_\_\_

Telephone (with code): Mobile:

(c) E-mail of the Institution: (d) E-mail(personal):

7. Name of the affiliating University:

8. Teaching Subject: \_\_\_\_\_\_Specialization: \_\_\_\_\_Specialization: \_\_\_\_\_

9. (a) Qualifications :

- (b) Total Teaching Experience:(i) Previous (if any): \_\_\_\_\_ (ii) Present Experience: \_\_\_\_\_
- (c) Type of Appointment: Part-Time/Contract/Adhoc/Temporary/Permanent

12. \*First continuous appointment as Assistant Professor:

- (a) Date or due date of confirmation:
- (b) Date of joining the present job:
- (c) Date or due date of Promotion from Stage-I to Stage-II: \_\_\_\_\_\_
- (d) Date or due date of Promotion from Stage-II to Stage-III: \_\_\_\_\_
- (e) Date or due date of Promotion from Stage-III to Stage-IV: \_\_\_\_\_

(\* - Tick the appropriate one)

(a	) Session	Colle	je/Department:	
(b	) Session:	Colle	je/Department:	
(c)	) Session:	Colle	ge/Department:	
	/ould you require First come first ser		on in the Guest House during the programme (Put tick mark) Yes/N	lo:
15 (a)	) Have you alread	y attended ar	Orientation Programme: (Yes/No), If yes, give details:	
	From:	to:	at:	
16. H	ave you already a	ttended any I	efresher Course: (Yes/No), If yes, give details:	
(a	a) Refresher Cours	se in:		
	From:	to:	at:	
(b	o) Refresher Cours	se in:		
	From:	to:	at:	
(c	c) Refresher Cours	se in:		
	From:	to:	at:	
incorr Place	rect, my applicatio	n/selection is	rstand that in the event of any information being found false, inconsistent to be rejected at any stage. Signature of the Applic	ant
incorr Place Date:	rect, my applicatio	n/selection is 	liable to be rejected at any stage. Signature of the Applic	ant
incorr Place Date: <b>Reco</b>	mendation of t	n/selection is  t <b>he forwardir</b> hat:	liable to be rejected at any stage. Signature of the Applic g authority:-	ant
incorr Place Date:	mendation of t I hereby certify th Our College/Inst (University) sin	n/selection is 	liable to be rejected at any stage. Signature of the Applic	
incorr Place Date: <b>Reco</b> (i)	mendation of t I hereby certify th Our College/Inst (University) sin UGC Act, 1956 v	the forwardir hat: nce ide letter No	liable to be rejected at any stage. Signature of the Applic g authority:- on is affiliated to and recognized under section 2(f) and included under section	12(B) o
incorr Place Date: <b>Reco</b>	mendation of t mmendation of t I hereby certify th Our College/Inst (University) sir UGC Act, 1956 v Our College doe University of The above applie	the forwardir the forwardir hat: itute/Organization ride letter No s not come wit	liable to be rejected at any stage.  Signature of the Applic g authority:- on is affiliated to	12(B) o
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<ul> <li>incorr</li> <li>Place</li> <li>Date:</li> <li>(ii)</li> <li>(iii)</li> <li>(iii)</li> <li>(iiv)</li> <li>Date:</li> <li>(Note:</li> </ul>	rect, my applicatio	In/selection is the forwardir hat: itute/Organizati nce vide letter No s not come wit cant has not at tion except as of the above na to participate ir Il respects. ioned certifica	liable to be rejected at any stage.  Signature of the Applic g authority:-  n is affiliated to	12(B) of the formula to the formula
incorr Place Date: <b>Reco</b> (i) (ii) (iii) (iii) (iv) <b>Date:</b> (Note:	rect, my applicatio	In/selection is the forwardir hat: itute/Organizati nce vide letter No s not come wit cant has not at tion except as of the above na to participate ir Il respects. ioned certifica	liable to be rejected at any stage.  Signature of the Applic g authority:- on is affiliated to	12(B) o the till be complet stitution

Director (UGC-HRDC)

Superintendent/ Dealing Clerk