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GOKHALE INSTITUTE OF POLITICS AND ECONOMICS (Deemed to be University u/s 3 of the UGC Act, 1956) 846, Shivaji Nagar, BMCC Road PUNE - 411 004

Telephones: (020) 25683300 Website: www.gipe.ac.in

Email: gokhaleinstitute@gipe.ac.in

Application Fo	rm for TE	ACHING	POSTS
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1. Application for the post of:		(SC / ST / C)PEN) Advt. No. G	IPE-ADVT-MAR-2023	
2. Full name in block let	ters beginning with surna	ame: Dr./Mr./Miss	/Mrs		
3. Address for Correspo	ndence:				
Telephone No.:	Mobile	2:	Email:		
4. Permanent Address:					
5. Male/Female:	6. Married/Un	imarried:	7. No. of C	hildren:	
8. Date of Birth:	9. Age: 10). Mother Tongue	:1:	L. Nationality:	
12. Category (tick which	ever is applicable)				
OPEN	SC ST	ОВС	VJNT SB	c 🗌	
13. Educational Qualific	ations:				
Examination	University/ Board	Month & year of passing	Subjects	% of marks obtained	Class/ Division/ Grade awarded
Matriculation/ S.S.C./S.S.L.C.					
Higher Secondary/ Pre-University					
Bachelor's Degree (B.A./B.Sc./B.Com)					
Master's Degree (M.A./M.Sc./M.Com)					
M.Phil. Degree					
Ph.D. Degree					
Others (Specify)					

14. Have you qualified at the JRF/NET/SET eligibility for Lectureship?

If yes, date of qualification: _____

No

Yes

- 15. If the thesis for the Ph.D. degree has been submitted for examination but the Ph.D. degree has not yet been awarded, please give the date on which the thesis has been submitted for examination.
- 16. Title of the thesis for

	Master's Degree:
	M.Phil. Degree:
	Ph.D. Degree:
17.	. Area(s) of Specialization:

18. Employment History:

	De sitiere e he lel	Nature of appointment:	Period of Appointment	
Institution	Positions held	Permanent/ Temporary	From	То

19. Present Employment:(a) Name and address of the Institution where employed:	
(b) Designation:	
(c) Pay-Band and AGP: Pay-Band Rs.	AGP
(d) Date of appointment	
(e) Date of next increment	
(f) Pay and allowances drawn:	
Pay Band	
Basic Pay	Rs
Academic Grade Pay	Rs
House Rent Allowance	Rs
Compensatory Local Allowance	Rs
Transport Allowance	Rs
Other allowances (specify)	Rs
Total	Rs

(g) Which retirement benefits are you entitled to in your present employment? Contributory Provident Fund (@______ per cent of the basic pay) / Pension-cum-Gratuity: ______

20. Experience: (Please attach separate sheets if required)

(a) Teaching:

Institution	Subjects taught	Undergraduate/ Postgraduate	Number of years

(b) Research: (*Please attach separate sheets if required*)

Institution	Title of the Project	Funding / Sponsoring agency	Date of commencement	Date of completion

(c) Research Guidance: Number of research students guided for the degree:

M.A./M.Sc./M.Com	M.Phil	Ph.D
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(d) Other (Specify): _____

- 21. Publications: (Please attach separate sheets if required)
- (a) Books published:

Title of the book	Publisher	Year

(b) Articles published in professional journals: (*Please attach separate sheets if required*)

Title of the article/s	Year, name of the journal, volume & issue number, pages

22. Any additional information such as scholarships, prizes, etc., awarded to you: (*Please attach separate sheets if required*)

23. Specify whether the candidate is a Person with Disability. If yes, specify the nature and extent of the disability.

24. If selected, what period would you require for joining?		
25. Have you applied previously for any post or fellowship in the Institute?	Yes	No

If yes, give details (year in which applied, post for which applied, interviewed or not, selected or not):

26. Please give the name, address, E-mail and contact numbers of three referees who can support your application. Kindly attach the written references of at least two referees in a sealed envelope, specifically supporting your application for the post in Gokhale Institute of Politics and Economics.

Sr. No.	Name of the Referee	Address	Email	Contact number
1.				
2.				
3.				

27. Details of Payment:

DD Number / RTGS/NEFT	Date	Amount (Rs.)	Name of the Bank	Name of the Branch

I hereby declare that all information furnished in this application and its other enclosures is true, complete and correct to the best of my knowledge. I understand that in the event of any information being found false/ incomplete/ incorrect or misleading, my candidature/appointment is liable to be cancelled/terminated at any stage including during service.

Place: _____

Date: _____

Signature of the Candidate

То The Vice Chancellor **Gokhale Institute of Politics and Economics** Pune – 411 004

Sir

I am forwarding the application of Dr./Mr./Miss/Mrs.

working in ______ as _____ as _____ with the following remarks:

(only for already in service)

Yours faithfully,

(Signature and Stamp)

Date: