



योजना तथा वास्तुकला विद्यालय, विजयवाड़ा
School of Planning and Architecture, Vijayawada

Application for Faculty Positions

Application No.
(For office use only)

To
The Director
School of Planning and Architecture
Survey No.4/4, ITI Road,
Vijayawada, (AP)- - 520 008

Affix your
recent pass
port size
photograph

Post applied for

S.No.	Name of the post	Department

SBI Collect/DD.Reference No., Date, Amount Paid: _____/_____/_____

1. Name:

(First name)

(Surname)

2. Father`s Name:

(First name)

(Surname)

3. Date of Birth:

Date

Month

Year

(Attach proof)

4. Gender:

Male/Female/Transgender

5. Address for communication:

with e-mail ID & Mobile Number

6. Permanent Address:

with e-mail ID & Mobile Number

7. Marital Status:

Married/Un Married/Single

8. Category

GEN/SC/ST/OBC(NCL)/EWS

(attach certificate if, seeking reservation to SC/ST/OBC(NCL)/EWS)

9. Are you seeking reservation under PwD ?

If yes, specify in the box provided (attach Certificate)

10. Nationality:

11. Educational qualifications: (starting from the Highest qualification up to UG level):

S.No.	Examination Passed (with specialization)	Institute / University	Marks obtained	Division with % (or CGPA)	Year of Passing

All UG/PG/PhD has to be from recognised University. UG & PG qualifications obtained from foreign degrees must be supported with foreign degree equivalence certificate AIU/MHRD. (attach separate sheet, if necessary).

12. Work Experience (starting from present) (attach separate sheet, if necessary with supporting certificates) :

S.No	Employer's Name and Address	Designation	Permanent / Contract	Scale of Pay/Basic Pay	Total Emolument s	Period of work		Total duration	Nature of Work
						From	To		

13. Membership / Registration of Professional Institutions / Societies: (attach Certificate)

Name of the Professional Institutions / Society	Type of Membership along with Registration Number(s) as on date.

14. Thesis (UG / PG / Ph.D. completed) Supervision if any: (attach separate sheet, if necessary)

S.No.	Name of Student	Year of Completion	Title of Thesis	Co-guides (if any)

15. Additional Administrative responsibilities handled: (Attach separate sheet if necessary)

S.No.	Period	Designation	Organization	Nature of Responsibility

16. Publication (Papers published in National / International Journals /Peer reviewed and Conferences & Books) (attach separate sheet, if necessary)

S.No.	Author (s)	Year	Title	Complete reference of Journal with ISBN/ISSN/DOI

17. Awards / Recognitions and Fellowships (attach separate sheet, if necessary)

S.No.	Award Name	Awarding Organization	Awarded Work / Project

18. Are you from Govt./Semi-Govt./PSU/Autonomous bodies/Govt. funded Institutions/Universities. (YES/NO). (In-service candidates possessing essential qualifications and experience have to apply through proper channel (refer format at the end of the application form).

19. Have you been imprisoned by and Court of Law past 10 years for any criminal or civil act? If so, give details:

20. Are you related to anybody employed in School of Planning and Architecture, Vijayawada as on date YES/NO:

If YES, indicate (i) Name of employee :
(ii) Nature of Relationship:
(i.e. Parent, Child, Sibling,
Cousin, Uncle, Aunt, Nephew
or Niece of self or of Spouse)

21. Training programmes / workshops / conference conducted, if any:

22. Any other additional information, if any:

23. References (Any two) :

(These persons should be residents of India and holders of responsible position, and should be well acquainted with applicant's character and work, but must not be in applicant's relation).

i) a) Name : _____	ii) a) Name : _____
b) Position : _____	b) Position : _____
c) Address : _____ _____	c) Address : _____ _____
d) Email : _____	d) Email : _____
e) Phone No : _____	e) Phone No : _____
f) Fax : _____	f) Fax : _____

APPLICANT'S DECLARATION

- (a) I hereby declare that the information provided in this form and annexures are true to the best of my knowledge and belief. I have understand myself that I fulfil all the eligibility requirements.
- (b) I shall submit myself to the disciplinary jurisdiction of the competent authorities of the Institute/ordinances and the rules that have been framed by the Institute.
- (c) I agree that the decision of the school on all matters will be final and binding on me.
- (d) I understand that my association active or passive with any unlawful organizations is forbidden.

Date: _____

Signature of the Applicant

This is to certify that Shri/Smt./Ms.(Name)_____ is working as
(Designation)_____ since(DOJ)_____
_at (Name of organization) _____
. He/ She is presently in pay matrix of Level_____ cell_____ of Rs._____ as
per 7th CPC.

This Institution/Organisation has No Objection of the applicant being considering for the post
applied for. It is certified that no vigilance/disciplinary case is pending or contemplated or
initiated against the Official. The integrity of the officer is certified.

Signature of the Head of the Organization/Institute

Name: _____

Designation: _____

Date: _____

Organization/Institute Seal

Dated: _____

List of Enclosures:

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