

CHARUTAR VIDYA MANDAL'S
A. R. College of Pharmacy and G. H. Patel Institute of Pharmacy
Post Box. No. 19, Vallabh Vidyanagar-388120,
Dist. Anand, Gujarat.

Last Date for Receipt of Application: 28/01/2022

Application form for the teaching post of: _____
in subject of : _____

*Affix Recent
passport size photo*

NOTE :

- (a) The person already in employment should forward the application through the employer.
 - (b) The application should be submitted along with attested copies of the relevant certificates, mark sheets, testimonials etc.
 - (c) Additional sheets of paper may be attached if the space provided against any item is insufficient.
 - (d) Candidate should be proficient in English.
 - (e) Candidate should apply separately for each post.
 - (f) Minimum Qualifications, Experience per norms of AICTE / PCI / GTU or as per prevailing rules.
 - (g) Actual requirements may change at the time of interview.
 - (J) State Pharmacy Council Registration is required.
 - (h) **Candidate should send their application in hard copy only (by speed post/Regd. Post) to The Principal(I/c) at above mentioned address.**
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6. Details of Professional Experience:

| Name & Address of the Employer | Designation of the post held | Period of Service | | Nature of Service | Total Salary drawn p.m. (Rs.) |
|--------------------------------|------------------------------|-------------------|----|-------------------|-------------------------------|
| | | From | To | | |
| | | | | | |
| | | | | | |

7. Research experience with details of research papers and articles published

(a) **Research work done as student for Master/Doctorate Degree:**

| Degree | Topic | Period | | Institution | Name of Guide |
|-----------|-------|--------|----|-------------|---------------|
| | | From | To | | |
| M. Pharm. | | | | | |
| Ph.D. | | | | | |

(b) **Research/Review Papers:**

| Sr. No. | Title of paper | Vol./Year/ Pg. No. | Name of the Journal | Impact factor, if any |
|---------|----------------|-----------------------|---------------------|-----------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

(c) **Book/Monograph etc.:**

| Sr. No. | Title of the book | Month / Year | Name of Publisher | ISBN number |
|---------|-------------------|--------------|-------------------|-------------|
| 1. | | | | |
| 2. | | | | |

8. Details of any other innovations / activity involved during professional career:

| Sr. No. | Particular |
|---------|------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |

Present Designation: _____

Institute: _____

Date of Joining present post: _____

Present Basic Pay Rs. _____ Pay Scale : _____

Total emoluments, pm. Rs. _____

Salary Expected: _____

9. Name and Address of two persons for reference who are not related to the candidate but who are acquainted with the work and character of the candidate:

| | | |
|-------------|--|--|
| Name | | |
| Designation | | |
| Address | | |
| | | |
| Contact no. | | |
| Email. Id | | |

10. Whether the candidate is convicted for any offence under any Civil / Criminal Law?
(If yes, provide the details) Yes/No

12. Whether any Civil / Criminal Case is pending?
(If yes, provide the details) Yes/ No

13. Computer Knowledge.
(If yes, provide the details) Yes/No

List of Testimonials / Certificates / Marksheets of which copies are attached with the application:

| Sr. no. | Particular | Yes/No |
|----------------|--|---------------|
| 1. | School Leaving Certificate | |
| 2. | Mark sheets (HSC, final semester only) | |
| 3. | Degree Certificate(s). | |
| 4. | State Pharmacy Council Registration (renewal receipt) | |
| 5. | Photo ID (Aadhar card/Pan card/Driving license) | |
| 6. | All experience letters. | |
| 7. | Others Supporting documents. (first page of manuscript only) | |

I hereby declare that the information given above is true and correct to the best of my knowledge, information and belief.

PLACE:

DATE:

Signature of the Candidate