UGC-MALAVIYA MISSION TEACHER TRAINING CENTRE

(formerly known as UGC-Human Resource Development Centre) KURUKSHETRA UNIVERSITY KURUKSHETRA

> (Established by the State Legislature Act XII of 1956) ("A++" Grade, NAAC Accredited)

PROFORMA OF PERSONAL PARTICULARS OF THE TEACHER-PARTICIPANT

Please read the Instructions before filling in this form:

- (a) This form must be filled in completely and no column should be left blank.
- (b)Incomplete form will NOT be considered.
- (c)This form must be forwarded through proper channel.
- (d)Strike out which is not applicable.
- (e)Only those teachers who are selected for a particular course will be informed about the programme.
- (f)Every teacher is required to present a seminar paper during the course.
- (g)Certificates of completion of course will be given to those participants who attend the course.
- (h)The teachers may apply on our office E-mail: ugcasc_kuk@yahoo.co.in

OURSES TO BE ATTENDED:			MME (Common for To	r teachers in all subjects)				
	(ii) REFRESHER CO Commencing		To					
	OR							
	(iii) SHORT-TERM	COURSE/WOI	RKSHOP/WEBINA	R/OTHER PROGRAMM				
1. Name: Dr//Mr/Miss/Mrs:								
2. College/Department Addre	ess:			Affix Passport Size				
				Photograph				
3. Name of the Affiliating Un	niversity:							
4. Whether College/Institute/	University is included under	Section 12(B)	of UGC Act	(Yes/No)				
5. Correspondence Address:	Correspondence Address:							
	.Pin Code							
Telephone Number(Off.)	(Res.)Mob							
E_mail ID:								
6. Date of Birth:		7. Gender	r : Male/Female					
8. Whether belonging to Sche	eduled Caste/Tribe or	:						
OBC or Differently Abled			(State Category,	if any)				
9. (a) Designation:		(b) Grade	e Pay :					
10. Subject:								
11. First continuous appointmen	ıt	:						
12. Date of joining the present jo	ob	:						
13. Due date of next higher grad								

14.	Status of Appointmen (i)Permanent (iv)Part-Time	t (Please Tick) (ii)Adhoc (v)Contract	(iii)	Tempo	orary		
15.	The type of College/U (i)Govt. (iv)Autonomous	Iniversity/Institution (Please (ii)Govt. Aided (v)University Dept.	Tick):	(iii) (vi)	Self-Financed Any Other	1	
16	Total Teaching Exper	ience :	Year	Months _			
17.	Have you already atte details:	nded any course at Kuruksh	etra University, K	urukshetra oi	r at any other pla	ce? If yes, give	
	Courses	Subject		me of the C/HRDC/RC	CCB/MMTTC	Dura	ation
						From	То
	Orientation Programi	ne/FIP					
	Refresher Courses						
	I						
	III						
	Short-Term Course						
understa	and that in the event of se to abide by the rule	rmation furnished in this a any information being founds/guidelines of the UGC-Ma	d false, incomplet	s true, comp	olete and correct t, my application	admission is li	able to be rejected/cancelled
	;						
						(Signa	ature of the Teacher)
I herby (i) Our (ii) Our (iii) Our (iii) Ou of (iv)The	certify that: College/University is in College comes in the p College does not com application of the above to participate in the	rding authority:- Please Tick necluded in the list of institution of the Section 12 (Be in the purview of the Section 12 (Be in the purview of the Section o	ons under Sec.2 () of the UGC Act on 12 (B) of the UGC at the dwith the recompated on Duty Lea	f) of the UGO JGC Act, but least 2 years; mendation the	has been affiliate		•
Date						Principal/Head (rubber stamp)	