AKHIL BHARATIYA MARATHA SHIKSHAN PARISHAD'S

ANANTRAO PAWAR COLLEGE OF ARCHITECTURE

S. No. 103, Shahu College Campus, Parvati, Pune – 411 009.
Office No. : 020-24219901 I 24213301

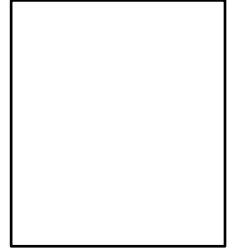**Web. :** www.apcoapune.org   **Email :** abmspcoa@rediffmail.com

Approved by Council of Architecture, New Delhi & Govt. of Maharashtra, Affiliated to Savitribai Phule Pune University
University Identification No. PU/PN/Arch / 462 / 2014, COUNCIL OF ARCHITECTURE CODE - MH 71, DTE CODE - AR6837.

APPLICATION FORM (TEACHING STAFF)

1) Post Applied For: - Professor / Associate Professor/ Assistant Professor

Name in Full (IN BLOCK LETTERS)

Address for Correspondence:

City: _____   Taluka: _____   Dist.: _____   Pin: _____

Telephone No.:   **Mobile No.:**

Email: **Date of Birth:**

2) Caste:- _____   **3) Category:**_____

4) Academic qualification: (Enclose Attested Photo Copies of the certificates)

Sr. No.	Name of Degree	Name of University	Month and Year of Passing	Class Obtained	% Marks / CGPA
1	Ph.D.				
2	Post Graduate				
3	Graduate				
4	COA Reg. No.		Validity		

5) Teaching Experience Record:

Total Teaching Experience in years and months: - _____Y._____M

(Enclose Attested Photo Copies of the Experience certificates

Sr. No.	Name Of College /Institute/Organization	Duration From –To	Position Held	Remark
1				
2				
3				
4				
5				

6) Professional/Industrial/ Research Experience Record:

Total Teaching Experience in years and months: _____Y._____M

(After the date of COA Registration & excluding full time teaching)

Sr. No.	Name Of College /Institute/Organization	Duration From –To	Position Held	Remark
1				
2				
3				
4				
5				

7) **Time required for Joining: -** _____

8) **Achievements /Awards:** _____

9) Any other information relevant to the post: _____

10) **Research & Publication:** _____

_____

_____

11) **Present Salary:-** _____ **Expected Salary:-** _____

12) Two local references for verification:

Sr.No.	Name	Designation	Mobile No.	Email Id
1				
2				

Please produce all original copies of certificates and documents at the time of interview.

I hereby certify that the information given above is true, complete and correct to the best of my knowledge and belief. If any of the information is found false, I will be personally responsible for the consequences arising thereby.

Place: _____   Signature: _____

Date: _____   Name: _____

....

FOR OFFICE USE ONLY

COMMITTEE REMARK:

1) Application recommended for post of Professor/Associate Professor/Assistant Professor.

2) Application rejected due to not eligible.

3) Application rejected due to insufficient documents.

Scrutinized by: 1.   Signature: 1.

2.   2.

3.   3.

List of Documents Attached herewith

Sr.No	Attested copies of the Documents	Yes/No
01	SSC Certificate /Mark List	
02	HSC Certificate /Mark List	
03	Graduation Mark list	
04	Graduation Degree certificate	
05	PG Mark List	
06	PG Degree Certificate	
07	Ph. D Provisional /Declaration Certificate	
08	Ph. D degree Certificate	
09	Valid proof of date of Birth (PAN/ Leaving certificate /Birth certificate /passport)	
10	PAN card	
11	AADHAR CARD	
12	Nationality certificate or documents	
13	Domicile certificate or documents	
14	Name change documents as applicable	
15	Caste / Tribe Certificate	
16	Caste / Tribe validity Certificate	
17	Non Creamy layer (Valid certificate) as applicable	
18	EWS Certificate as applicable	
19	Address proof (Electricity bill/property tax/pass port or any other valid proof of address)	
20	Council of Architecture registration certificate	
21	Professional Experience documents	
22	Teaching Experience documents	

Applicant Name & signature