## APPLICATION FORM FOR ACADEMIC FELLOW

<b>Note</b> 1. Fill in application in block letters or t
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- 2. Attach separate page(s) in case of insufficient space in any column.
- **3.** Completed forms should be sent through e-mail as pdf or word attachment to hr@aud.ac.in *OR* (Write outside the in email subject box : Academic Fellow (On contractual Basis).
- 4. See website (www.aud.ac.in) for details about schools, programme structures, etc.

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2.	2. a) Schools/programmes:																					
	b)Area(s) of specialization:																				 	
3.	Nar	me i	in fu	ıll					:	_										 		
4.	. Address for correspondence:																					
																•						
5.	. (a) Tel. no. (with STD code):																					
	(b)	М	obile	e no	).			:														

(c) E-mail addre	SS :							
(Day) 6. Date of birth	(Month)	:	(Year)					
7. Nationality/citize	enship :							
8. Educational qual		ach additi	onal pages if ned	cessary): Percentage	Subjects			
examination/Degree	University/ Board	Awarded		marks/ grade	Subjects			
Graduation or equivalent	Board	Awarded		marks/ grade				
Post Graduation or equivalent								
MPhil (other details in 9. below)								
PhD (other details in 10. below)								
Other (NET)								
9. Title of MPhil the  10. Title of PhD the								
Discipline/area in which awarded:								
Name(s) of the PhD	) supervisor(s							
11. Experience (star		most rece	ent, attach additi Period		necessary):	c pay		
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12. **Publications**: Provide details of books (single author and co-authored or edited), journal articles/papers, other professional writing or accomplishments (e.g., performances, recordings, films, official reports). Details should include publisher / journal names, volume numbers, publications dates, page numbers, ISBN numbers, etc. (Attach additional pages if necessary).

## 13. Language(s) known:

Language (s) known	Read	Write	Speak
(Please tick)			
(i) English			
(ii) Hindi			
(iii)			
(iv)			

14. Other relevant information you wish to provide (e.g., membership of professional bodie	es;
editorships; membership of national / international committee; technical / professional	/
artistic credentials; government commendation, etc.).	
15. Certified that the information given by me in this form is complete and correct to the	ne
best of my knowledge and nothing has been concealed. I consent to the University verifying	ng
information given in this form.	
Date:	
Place:	
Signature	