ANNAMALAI UNIVERSITY

RAJAH MUTHIAH DENTAL COLLEGE & HOSPITAL

Application Format for Promotion of Teaching Staff (In-service regular Faculty Members)

Recent Passport size Photograph to be counter signed by Dean / Principal

All su	upporting documents should be enclose	ed a	s annexure with page numbers in the se	erial order of the application proforma
1.	Full Name	:		Token No.
2.	Father's Name	:		
3.	Date of Birth & Age in years (DD/MM/YYYY) (Proof to be enclosed)	:		
4.	Correspondence Address (Copy of Passport /Voter Card / Electricity Bill / Telephone Bill / Aadhar Card)	:		
5.	Permanent Address (Copy of Passport /Voter Card / Electricity Bill / Telephone Bill / Aadhar Card)	:		
6.	Phone No.	:	Mobile	Land Line with STD Code
7.	Email ID	:		
8.	Aadhar Card Details (Copy to be enclosed)	:		
9.	Present Designation (Copy of the Appointment Order to be enclosed)	:		
10.	Division	:		
11.	Date of Joining in the Present Position (Copy of the Joining Report to be enclosed)	:		
12.	Confirmed in the Present Position or Not, if Yes enclose the Copy of the Order	:		
13.	Pay Scale / Special Allowance, if any.	:		
14.	, ,	:		

15. Qualification					
Qualification	College University		Year	Registration No. with date	Name of the State Dental Council
BDS					
MDS/DNB/Ph.D Subject:					

Note: Copy of the Degree (BDS / MDS / DNB / Ph.D) Certificates and Registration and additional Qualification Registration certificate to be furnished.

16. Details of the teaching experience till date.					
Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Tutor					
Lecturer					
Reader					
Total					

Note:

1. Copies of the Experience Certificates / Appointment Order / Joining Report in each designation to be enclosed.

	Training / Course/ hands on workshop attended. (Provide details and attach proof)	-					
18.	18. Number of Research Publication in Indexed		International Jo				
	Publication in Indexed Journals*		National Journa				
	(Copies of the reprints to be enclosed)		State / Institution	onal Journals			
19.	J		Books Authored / Co-authored				
	(Proof to be enclosed)		Editor in Chief				
			Editorships				
			Peer Reviewer Others				
20.	Number of Conferences	:	National				
20.	Attended Of Comercines		International				
	(Proof to be enclosed)						
21.	21. Number of Papers Presented in the Conferences (Proof to be enclosed)		National				
			International				
22.	Honors / Awards / Fellowship for Outstanding Achievements	:	Name of the Award / Fellowship	Elected / Honorary	Awarded by	Year of Award	
23.	Details of Referee	:	Name of the Referee	Post held by Referee	Phone & Mobile Number	Email	

Note:

- $1. \quad \text{All the supporting documents should be copied} \ / \ \text{Xeroxed with clarity and self-attested}.$
- 2. Incomplete applications and application received beyond the last date/time will be rejected.

DECLARATION

are true and correct to the best of me that in the event of any information application for candidature is liable	e statements/ particulars made/furnished in this application by knowledge and belief. I also declare and fully understand in furnished being found false or incorrect at any stage, my to be summarily rejected at any stage and if I am already
appointed, my services are liable to	be terminated without any notice.
Place:	
Date:	Signature of the Applicant