

INDIAN INSTITUTE OF SPACE SCIENCE AND TECHNOLOGY

(Declared as deemed to be University under section 3 of the UGC act 1956) $Thiruvan anthapuram-695\ 547$

APPLICATION FOR FACULTY POSITIONS

| Advertisement No. | : | Advt No. | |
|--|--------|-------------|-----------------------------|
| Post Applied for | : | | |
| Post Code | : | | |
| Department | : | | |
| 1. Name in Full (Cap (As per SSLC record) | itals) | | (affix passport size photo) |
| 2. Date of Birth | : | | |
| 3. Nationality | : | | |
| 4. Sex | : | | |
| 5. Present Address | : | | |
| Phone: | Fax N | o.: e-mail: | |
| 6. Permanent Address | : | | |
| | | | |
| Phone: | Fax N | o: e-mail: | |

7. Educational Qualification (From Xth Standard onwards)

(Please attested photocopies of mark sheets and certificates and brief synopsis of the Master's & the Doctoral thesis)

| Sl No. | Qualification | Subject | University/Institute / Board | Percentage/Class/ Grade | Year of Passing |
|-----------|--------------------|---------|---------------------------------|----------------------------|--------------------|
| 1. | X | | | | |
| 2 | XII | | | | |
| 3 | B.Sc/B.Tech/BE | | | | |
| 4 | M.Sc | | | | |
| 5 | M.Tech/M.E./M.Phil | | | | |
| 6 | Ph.D/D.Phil | | | | |

8. Post doctoral Experience (National/International) *

| Sl. No. | Name of Award/ Fellowship | Name of Institute/ University | Duration of program | Special Distinction If any |
|---------|------------------------------|----------------------------------|---------------------|-------------------------------|
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^{*} If required separate sheet may be attached as Annexures

9. Professional Experience (Reverse Chronological order)

| Sl. No. | Position Held | Name of Institute/ University/Organization | Duration | Reason for Leaving |
|---------|---------------|---|----------|--------------------|
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^{*} If required separate sheet may be attached as Annexures

10. Teaching Experience:

| Sl. No. | Institute/ University | Duration | Area(s) |
|---------|-----------------------|----------|---------|
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^{*} If required separate sheet may be attached as Annexures

11. Courses Taught:

| Course No. & Title | Level (UG/PG) | Number of Times | Developed by |
|--------------------|---------------|-----------------|--------------|
| | | | |

^{*} If required separate sheet may be attached as Annexures

12. Thesis (M.Sc/M.Tech/Ph.D.) Supervision:

(at all the organizations that you have worked with)

| Sl. No. | Name | Year of completion | Title of Thesis | Co-guides(if any) |
|---------|------|--------------------|-----------------|-------------------|
| | | | | |

13. Sponsored Projects Undertaken:

| Sl. No. | Sponsoring Organization | Title of Project | Amount of Grant and Duration | Co-Investigators (if any) |
|---------|----------------------------|------------------|------------------------------|---------------------------|
| | | | | |

14. Industrial Consultancy/Project undertaken:

| Sl. No. | Duration | Organization | Details of consultancy | Co-Investigators (if any) |
|---------|----------|--------------|------------------------|---------------------------|
| | | | | |

15. Industrial Experience:

| Sl. No. | Duration | Organization | Title of Project and Nature of work | Designation |
|---------|----------|--------------|-------------------------------------|-------------|
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16. Administrative Experience:

| Sl. No. | Duration | Organization | Nature of Responsibility | Designation |
|---------|----------|--------------|--------------------------|-------------|
| | | | | |

17. National / International Symposium/Workshops/Winter/Summer Schools organized:

| Sl. No. | Title of symposium/workshop | Sponsors | Duration | Co-convener |
|---------|-----------------------------|----------|----------|-------------|
| | | | | |

18. Publications

(Enclose reprint of the best papers (about five) in your judgement)

i. Papers published in referred International journals

| Sl. No. | Author(s) | Year | Title of paper | Complete Reference of Journal |
|---------|-----------|------|----------------|-------------------------------|
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| Sl. No. | Author(s) | Year | Title o | of paper | Complete Reference of Journal | | |
|--------------------|----------------------|--------------|-----------------------------------|-------------|---|-------------------|--|
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| iii. Paper | s published in refe | rred Interna | tional cor | ıfe rence | proceeding | S : | |
| Sl. No. | Author(s) | Year | Title o | of paper | | Name and Place of | |
| SI. INO. Author(8) | | 1000 | | 71 Perp 41 | Conference/Publishers | | |
| | | | | | | | |
| iv. Papers | s published in refe | rred nationa | l conferer | ice proce | | ma and Dlaga of | |
| Sl. No. | Author(s) | Year | Title of p | paper | Name and Place of Conference/Publishers | | |
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| v. Papers | presented in inter | national/nat | ional conf | erences | and not pu | blished | |
| Sl. No. | Author(s) | Yea | Year Name and Place of Conference | | | | |
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| vi. Books | s (List those publis | | oress separ ar of | rately): | | | |
| Sl. No. | Name of book | | Publishing | | ıbject | Co-authors | |
| | | | | | | | |
| | | | | | | | |
| 19. Paten | ts, Awards and Re | ecognitions | : | | | | |
| 20 Amr. (| Othor Dolovant Inf | amatian | . Civo | 00 00 000 | | | |
| 20. Any C | Other Relevant Inf | ormation | : Give | as an anr | nexure | | |
| 21. Name | es and Addresses o | f Three Refe | rees (incl | ıding e-r | mail/phone |) | |
| (All o | f them should be fa | amiliar with | your acad | demic wo | ork) | | |
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| Phone: ii) | | | | E -1 | mail : | | |
| 11) | | | | | | | |
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| Phone: | | | E-mail : | | | | |
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| iii) | | | | | | | |
| Di | none : | | F_mail • | | | | |
| 11 | IUIIC • | | E-mail : | | | | |

ii. Papers published in referred national journals

| 22. Present pay band and total salary : | | | | | | | | | |
|--|--|--|----------------------|------------------------|--------|--|--|--|--|
| 23. Salary Expected at HST : | | | | | | | | | |
| 24. Have you applied for any post in HST before? If yes, please give details | | | | | | | | | |
| Sl. | Name of The | Area of | Advt. No. | Date of | | | | | |
| No. | Post | Specialization | and Date | Interview | Result | | | | |
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| N I | Family details:- Name of Spouse Educational quali Children: | : fications: | | | | | | | |
| | Name: | | Age: | | | | | | |
| 26. | Current Areas of Whether SC/ST/O Attach a certificat | | : ty prescribed u | : nder government r | ules) | | | | |
| supp And | lied to me, | have carefully reactions this form as well a | | | - | | | | |
| There are enclosures with total of pages attached along with this form | | | | | | | | | |
| Date | : | | | | | | | | |
| Sign | ature : | | | | | | | | |
| Place | e : | | | | | | | | |
| Forw | varded Through: | Head of Institut | ion/Registrar (| With Seal) | | | | | |
| Place | e: | | Date: | | | | | | |

Note: The columns requiring additional sheets must be elaborated with annexures and a separate list of enclosures item wise with page numbers should precede the enclosures. All annexures should be consecutively arranged and must bear your name and signature.