



**National Assessment and Accreditation Council**  
An Autonomous Institution of the University Grants Commission

**राष्ट्रीय मूल्यांकन एवं प्रत्यायन परिषद्**  
विश्वविद्यालय अनुदान आयोग का स्वायत्त संस्थान

**Application for the post of Deputy Adviser / Assistant Adviser, NAAC  
On Deputation Basis**

Name of the Post Applied for : \_\_\_\_\_

**1. Personal Details:**

1	<b>Name</b>		<b>PHOTO</b>
2	<b>Father Name</b>		
3	<b>Community Category</b>	Latest caste certificate to be attached	
4	<b>Presently Working in</b>	Central/State Govt Organisation	
5	<b>Email Id</b>		
6	<b>Mobile Number</b>		
7	<b>Date of Birth</b>		
8	<b>Age</b>		
9	<b>State</b>		
10	<b>Nationality</b>		
11	<b>Permanent Address with pin code</b>		
12	<b>Postal Address with pin code</b>		

**2. Academic Qualifications:**

Sl No	Degree	University / Board	Main Subjects	YOP	Class	%
1						
2						
3						
4						
5						

**3. Research Degree:**

Sl No	Research Degree	Year of Award	Thesis Title	University	Details of Proof Attached (✓)
1					
2					

**4. Research Guidance:**

Sl No	Research Program	Name of Research Scholar	Thesis Title	Year of completion	Remarks / status
1					
2					
3					
4					
5					

**5. Employment Records (in reverse chronological order):**

Sl No	Name and Address of the Employer	From date	To date	Position held	Scale of Pay	Duration	Assignment	Details of Proof Attached (✓)
1								
2								
3								
4								
5								

**6. Seminars / Workshops / Conferences attended:**

Sl No	Topic	Type	Role	Date	Place	Details of Proof Attached (✓)
1						
2						
3						
4						
5						

**7. Books Published:**

Sl No	Book Type	Book Title	Book Chapter	Book Pages	ISBN	Year	Publisher Name	Author Type	Details of Proof Attached
1									
2									
3									

**8. Research Publications (Web of Science, Scopus and UGC Care list only):**

Sl No	Article Title	Year	Publisher/ Journal Name	ISSN	Vol Issue	Type	Published In	Details of Proof Attached
1								
2								
3								
4								
5								

**9. Training attended:**

Sl No	Training Type	Training Name	Place	From	To	Details of Proof Attached
1						
2						
3						
4						
5						

**10. Patents:**

Sl No	Patent Title	Awarded By	Number	Awarded Date	Details of proof attached
1					
2					
3					

**11. Awards:**

Sl No	Award title	Awarded by	Awarded date	Details of proof attached
1				
2				
3				

**12. Research and Consultancy Projects:**

Sl No	Name of the project	Sponsoring Agency	Duration From	Duration To	Name of PI/CO-PI	Amount sanctioned
1						
2						
3						
4						

**13. Professional Membership:**

Sl No	Professional Society	Membership ID
1		
2		
3		
4		
5		

**14. References:**

Sl No	Name	Designation	Address
1			
2			

**15. Other Details:**

Sl No	Govt. Emp.	Remarks	NOC proof
1			

I have carefully gone through the vacancy circular / advertisement and I am well aware that the information furnished by me in the above proforma, duly supported by the documents in respect of Essential Qualification / Work Experience, will be assessed by the Selection Committee at the time of selection for the post. The information / details provided by me are correct and true to the best of my knowledge and no material fact having a bearing on my selection has been suppressed / withheld.

Date: \_\_\_\_\_

(Signature of the candidate)  
Address: \_\_\_\_\_  
\_\_\_\_\_

**Certification by the Employer/ Cadre Controlling Authority**

The information/ details provided in the above application by the applicant are true and correct as per the facts available on records. He/ she possess the desired educational qualification and experience mentioned in the vacancy Circular. If selected, he /she will be relieved immediately.

(Authorised Signatory)

Name & Office Seal:

Date:

**VIGILANCE CLEARANCE CERTIFICATE**

Certified that no vigilance case or disciplinary proceedings or criminal proceedings is either pending or contemplated against Shri/ Smt. /Ms....., who has applied for the post of \_\_\_\_\_ on Deputation basis at National Assessment and Accreditation Council.

(Authorised Signatory)

Name & Office Seal:

Date:

**NO PENALTY CERTIFICATE**

Certified that no minor/major penalty has been imposed during the last 10 years on Shri/  
Smt./ Ms....., who has applied for the post of \_\_\_\_\_ on Deputation basis at  
National Assessment and Accreditation Council.

(Authorised Signatory)

Name & Office Seal:

Date:

**INTEGRITY CERTIFICATE**

After scrutinizing all relevant official records, including the list of officers of doubtful integrity, it is certified that integrity of Shri/Smt./Ms....., who has applied for the post of \_\_\_\_\_ on Deputation basis at National Assessment and Accreditation Council, is beyond doubt.

(Authorised Signatory)

Name & Office Seal:

Date: