## DECLARATION FORM (25 Details of appointments hold/ beaching experiences)

1.	Name of the Institution			Name of Institution
2.	Name of the Faculty Member	Nature of eppointment * *	Designation*	Recent Passport size photo attested by the
3.	Date of Birth			Principal
4.	Educational Qualifications (Beginning with)	College/ University	Year of passing	Percentage of marks (Aggregate)
	ithin or outside the state/ I am a	other institution w n/s.	gat present in any Mowing instructo	16. dam not worldn working in Ha
	lead in the state of the state	W *nots	on Designa	Name of the Instinct
5.	Passed NET/ SLET	: Yes	Year of passing	No.
6.	Designation & Subject tought			
7.	Date of appointment	in the delegate of the		1 bereby daylar
8.	Nature of appointment			c / Honorary/ Part time
9.	Scale of Pay			
10.	Present basic pay	d and found correct		
11.	Gross Salary per month	: ₹ (Salary is given in	Cash/ Cheque/ Cre	edited to my Bank A/c)
12.	Provident Fund Number	ng to the information	ininted statement	dete: All the original de
13.	Whether belongs to		C/ST/OBC others	
14.	Residential Address	urary/Fart time		* Permanent/Tempor
	Phone Number			
	e-mail address Fax Number	\$2 \$		

15 Details of appointments hold/ teaching experiences)

Name of Institution	Designation*	Nature of appointment * *	From	oT e of the Face	Total Experience (In years)
attested by the				of Sirth	
Percentage of marks	Superint for 1994	Coilege/ University	anethani(i	cod) famolina (Dujhering i	

16. I am not working at present in any other institution within or outside the state/ I am also working in the following Institution/s.

Name of the Institution	Designation*	Nature of appointment **	Emolument in Rupees per month
	eaq to rest []	367	1 828 V Fall Boses 1 - 1.0
			S. Dustynation & Subj

I hereby declare that all information furnished by me in this form are true.

Date:

Signature of the Employee

Verified and found correct

(Name and signature of the Principal)
With seal

**Note:** All the original documents pertaining to the information/s furnished above shall be made available to the LIC at the time of inspection.

- \* Lecturer/ Asst. Professor/ Reader/ Associate Professor/ Professor
- \*\* Permanent/ Temporary/ Adhoc / Honorary/ Part time