

NATIONAL LAW UNIVERSITY, ODISHA (established by Act 4 of 2008)

Application Form for Faculty Position								
National Law University, Odisha Brajbiharipur, Sector - 13, CDA, Cuttack – 753015, Ph: 0671-2121516				Registration Number (For Office use Only)		Paste your recent passport size photograph here		
Adv	vertisement No	••••	•••••					
1. Name of the post applied for								
2.	Applicant's area of spe (Applicant's area of special area of specialization notifi	ization m	ust be relevan					
3. Pe	ersonal Details							
4.	Name (in Capital Letters)	First Name			Mi	iddle Name	Surname	
5.	Date of birth	Day	Month	Yea	ır	Age as on da advertisemen		
6.	Place of birth	City / V	Village	I		State		Country
7.	Father's name							
8.	Mother's name							
9.	Nationality							
10.	Gender	Male /	Female					
11.	Community/Category (delete the ones not		C / ST / OB			U		
12.	applicable) Marital status	If other category:- Give details a. Married / Unmarried b. If married, name of spouse						
13. If physically disabled, indicate the relevant particulars			If appli Write '			Percenta Disabilit	0	S.No. of Proof enclosed
a. Blindness or low vision:								
	learing impairment							
c. Locomotor disability or cerebral palsy (includes all cases of orthopaedically handicapped)								

14. Educatio	onal qua	lific	cations (Attach	addition	al pages, if	f require	d)		
	Name the course		Name of the Board / University	Month & Year passed	Division	% of Marks	CGPA (if grading is applicable)	Subjects studied	S.No. of proof enclosed
	(a)		(b)	(c)	(d)	(e)	(f)	(g)	(h)
10 th Class/ equivalent									
10+2 /equivalent									
Bachelor's Degree									
M.Phil./ equivalent									
Ph.D									
Indicate spe has been aw		y wł	nether Ph.D. de	egree	Yes / No				
NET/SLIET lectureship,		Su	lbject		Roll No Year		Year	Positio	on
Any other Exams pass	ed								

Designation & scale of	Name & address of employers	Period of	of Experier	ice	Nature of work/duties	S.No. of
a scale of pay		From date	To date	No. of years /months (As on date of advertisement)	- work/dutie:	s proof enclosed
(a)	(b)	(c)	(d)	(e)	(f)	(g)
16. Total perio	S. No. of proof enclosed					
a) Teaching			o. of years	s No. of m	onths	
i) Under-gr	aduate level					
ii) Graduate	elevel					

iii) Post-graduate level		
b) Post-doctoral: Teaching/ Research		
c) Other experience, if any		

17. Academic distinctions	S.No. of Proof enclosed	
Name of the Academic Course / Body		

Publications	Published (Nos.)	Accepted/in Print (No.)	Communicated [other than b & c] (No.)	S.No. of proof enclosed
(a)	(b)	(c)	(d)	(e)
Books				
Research publications				
Other publications				

19. Seminars/Conferences/Workshops/Training programmes, attended/organized etc.	In India (No.)	Abroad (No.)	Total (No.)	S.No. of proof enclosed

20. Research guidance (No. of students guided)	M.Phil/ Equivalent (No.)	Ph.D. (No.)	S.No. of proof enclosed

Names & complete postal addresses	Referee – 1	Referee-2	Referee-3
Email:			
Phone(Landline) with STD Code:			
Mobile Ph:			
Fax:			

Designation	Name of the University/ Institution	Basic Pay (Rs.)	Pay Scale (Rs.)	Gross Pay / Total Salary p.m. (Rs.)	Increment date (Date/Month)	S.No. of proof enclosed

23. Any other information/ qualification relevant to the post applied for :

24. Candidate's Name 8	Address for corresponde	ence:		
	Mailing address		Permanent address	S
Name				
Complete Address with pin code				
Email:	Phone No. (Landline with STD code)	Mobile No		Fax No.

25. List of self attested testimonials attached (original to be produced at the time of interview). Please tick the ones applicable

- i. Matriculation marksheet / certificate
- ii. Intermediate marksheet / certificate
- iii. B.A. / B.Sc. / B.Com. (Final) marksheet/ degree
- iv. M.A./ M.Sc. / M.Com./ MBA (Final) marksheet/ degree
- v. M.B.A/C.A/C.S/I.C.W.A.I (Final) marksheet/ degree
- vi. L.L.B. (Final)marksheet / degree
- vii. L.L.M. marksheet / degree
- viii. M.Phil. degree
- ix. Ph.D. / D.Phil degree
- x. D.Litt, D.Sc., L.L.D. degree
- xi. NET, UGC-JRF, CSIR-JRF Award Certificate
- xii. Caste Certificate issued by the Competent Authority (OBC/SC/ST/etc)
- xiii. Experience certificate
- xiv. Recommendation letter(s)
- xv. Award (s) / Fellowship (s)
- xvi. Publication (s)

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Total Number of above self attested testimonials attached ______(in words)

N.B. Applications without the above self attested testimonials (applicable to the candidate) will not be entertained.

26. Declaration		
I,son/daughter ofhereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the Selection Committee and Executive Council meetings, my candidature / appointment may be cancelled by the University. Signature of the applicant *Name as signed (in BLOCK LETTER *Application not signed by the candidate Liable to the rejected		
27. Endorsement by the EMPLOYER (The endorsement below is to be signed and forwarded by the Head of the Department / Employer of the organization / ionstitution in the case of the in-service candidate whether in permanent / contact or temporary capacity Forwarded to the National Law University, Odisha, Brajbiharipur, Sector - 13, CDA, Cuttack - 753015, Ph.:0671-2121516 The applicant Dr./Mr./Mrs/Ms		
Seal	(Signature of the forwarding officer) Name: Designation: Place : Date:	