8cmx4cm



DR. RAM MANOHAR LOHIA INSTITUTE OF MEDICAL SCIENCES Vibhuti Khand, Gomti Nagar, Lucknow-226010 (UP) Ph: 0522-4918505, 4918555 Website: www.drrmlims.ac.in

Dated: 12.07.2022

Ref No.1588/CoN/Dr. RMLIMS/2022

WALK-IN INTERVIEW

Applications are invited on prescribed format for empanelment of Guest Faculty/Part-time Teachers in College of Nursing of the Institute for the subjects (1) Applied Sociology & (2) Communicative English. The terms & conditions for appointment and format of application can be downloaded from the website of the Institute; www.drrmlims.ac.in

Date of Walk-in Interview & Reporting Time: 23.07.2022 at 11:00AM & Venue: Academic Block, 5th Floor, C-Block, College of Nursing, Dr. RMLIMS, Gomti Nagar, Lucknow-226010. All candidates should fulfill the eligibility criteria as laid down by Indian Nursing Council for part time Teachers / Faculty.

Director



College Of Nursing DR. Ram Manohar Lohia Institute Of Medical Sciences

Vibhuti Khand, Gomti Nagar, Lucknow– 226010. PHONE No.-0522-4918505, 4918555, FAX - 0522-4918506, Website: - <u>www.rmlims.in</u>

APPLICATION FORM FOR GUEST FACULTY

Advertisement No. & Dated		
Post Applied For Department		
1. Full Name (In Block Letters):		
2. Father's /Husband's Name:		Affix recent
3. Date of Birth:		Passport Size Photograph with
4. Place of Birth:		Signature
5. Age (as on date of advertisement)YearsMonths	days	
6. Nationality:		
7. Sex : Male/Female		
Marital Status: Married/Unmarried		
9. Category: Gen/ SC/ST/OBC /Pc		
10- Adhar No Pan No		
1. Whether SC/ST/OBC : 1) Yes 2) NO (If yes, enclose certificate issued by the competent authorit		
Whether Physically Challenged 1) Yes 2) NO (If yes, enclose certificate issued by the competent authority on the format presonant preso		of India
(i) Nature of Disability		
(ii) Percentage of Disability		
11- Present Address for correspondence (with PIN code):		
Mob		
E-Mail:		
12. Permanent Address (With PIN code):		
Mob.		
E-Mail:		

13. Academic Qualifications	(attach attested	l copies)):
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Examination Passed	Year of Passing	Board/ University	% of Marks / Grade	Division	Subject	Remaks
High School						
Intermediate/ (10+2)						
Graduation						
Post Graduation						
Other, if any						
Technical Qualification (If any)						

14. Research Degree(s): (Attach self attested copies)

Degree	University	Specific Date of submission of Ph.D. thesis	Specific Date of Award	Title of Work
M. Phil.				
Ph.D./D.Phil.				
D.Sc./D. Litt.				
Other				

Whether Ph.D. awarded as	per UGC regulation	2009		YES / NO
Whether qualified NET/SLE	T conducted by UG	C/ CSIR/ ICAF	R/ STATE	
(if yes, indicate the date and	Subject)			
	Whether qualified NET/SLE		,	Whether qualified NET/SLET conducted by UGC/ CSIR/ ICAR/ STATE

15. S _I	oecial ar	rea of Ir	nterest:								
16. P	rize, Me	dal, Scl	holarship ł	nonors & a	awards received,	if any.					
17 0	etails o	f Fyneri	ience:								
	ne of emp		Date of	Date of	Position &	Salary	. Q. (Grade	l Da	easons for	eaving
INali	ne or emp	loyei	joining	leaving	Nature of duties		Pa			the job, if	
·	eaching	Experi	ence, if an	y (Indicato	a separate sheet.) :		T		U d	
		se Taug			ame of the University/ College/ Institution				ecturers Undertaken		
UG	PG	M.Phi	I. Other					UG	PG	M.Phil.	Othe
			ence, if any	/ (Indicate	period in years,	excludin	g p	eriod	spen	t for	I
	Research Stage			Title of Work/Thesis		University where the work					
M.Ph	il. or Equ	iivalent									<u> </u>
Ph.D.											
Post.	Doctora	1									
Public	cation (IS	SBN/ISS	SN/ Index N	0.							
(Give	a list se	parately	')								
I raini	ng pleas	se specif	ry								

20. Seminar/Conference/Symposia/Workshop attended & papers presented. (Attach Proof):

Name of the Seminar/ Conference/ Symposia/ Workshop etc./ Title of the Paper	Name of Sponsoring Agency	Place & Date

DECLARATION

I hereby declare that all the entries in this application form are true to the best of my knowledge and belief. I also declare that I have not concealed any material information which may debar my candidature for the post applied for. In the event of suppression or distortion of any facts like category or educational qualifications etc. made in my application form I understand that I will be denied any employment in the University and if already employed on any of the posts in the University, my service will be terminated forthwith.

Place:
Date:

Signature of the Applicant

Details of enclosures

- 1. High School (Mark sheet & Certificate)
- Intermediate/Hr. Sec./11th (Mark sheet & Certificate)
 Bachelor's Degree (Mark sheet & Degree)
- 4. Master's Degree (Mark sheet & Degree)
- 5. PhD.
- 6. Post. Doctoral
- 7. Other Certificates/documents (kindly provide the name)