

APPLICATION FORM

Application form for admission to the Refresher/Orientation Course/Workshop for College Principals/ Workshop in Computer Application in

1. Full Name (Block letters) : Dr/Mr/Ms
2. Name of the College/University :
3. Designation : Lecturer Senior Lecturer/Reader
4. Date of Birth :
5. Gender : Male Female
6. Address for Correspondence :
- Phone
- E-Mail
7. Nature of appointment : Regular Temporary
8. Category : SC ST OBC General
9. Teaching Experience as Lecturer : (years) (Months)
10. Refresher Courses/Orientation Courses attended :

Name of the ASC	Course	Dates (from-to)

11. Whether accomodation is required in the University Guest House Yes/No

Signature of the Applicant

I hereby certify that,

- i) Our College comes under the purview of Section 2(f) of the UGC Act or has been affiliated to for at least five years
- ii) The applicant has the teaching experience of years in Undergraduate/Post Graduate Course(s).
- iii) The details of her/his attendance in Refresher Course are entered in the Service Register.
- iv) The application of Dr/Mr/Ms for the Refresher Course/Orientation Course is forwarded and recommended to the Director, UGC-ASC, Mizoram University, Aizawl for consideration. If selected, she/he will be relieved in time to participate in the above course.

*Signature of the Principal/HoD
(with Seal)*