

Name and Department of the Staff (NGI) referred:………………………………………

**APPLICATIONFORM –SENIOR**

**(Applicable for the Members of Faculty from Self-Financing Colleges with more than 10 years of experience and still in regular service)**

1. Name (in Block Letters) :

Recent Photo

1. Date of Birth :
2. Designation :
3. College/Institution/University :
4. Department :
5. Discipline :
6. Areaof Specialization :
7. a.Residential Address
   1. Addressfor Communication :
   2. Mobile No. :
   3. EmailID :
8. **Qualification**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Degree** | **Major** | **Specialization** | **NameoftheCollege (with place)** | **Yearof Passing** | **University** | **% of Marks/ Rank if any** |
| **D.Sc. /D.**  **Litt.** |  |  |  |  |  |  |

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Ph. D.** |  |  |  |  |  |  |
| **M.Phil.** |  |  |  |  |  |  |
| **Masters / Bachelors** |  |  |  |  |  |  |

1. **AdditionalQualification**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No** | **Course** | **Major** | **Specialization** | **University** | **Duration** |
| **1.** | **PDF** |  |  |  |  |
| **2.** | **P.G. /P. G. Diploma** |  |  |  |  |
| **3.** | **Any Other** |  |  |  |  |

1. **a)Professional Experience**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Designation** | **Years** | | **Department** | **Name of the College/Organization** |
| **From** | **To** |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |

**b)Teaching Experience as on 01.06.2023**

|  |  |
| --- | --- |
| **Classes** | **No.ofYears** |
| **P.G.** |  |
| **U.G.** |  |
| **U. G. &P. G.** |  |

**c) Industry Experience as on 01.06.2025**

|  |  |
| --- | --- |
| **Name of the Industry** | **No. of Years** |
|  |  |

1. **Research Guidance(in numbers)**

M. Phil. Ongoing  Completed

Ph. D.Ongoing  Completed

1. **Research Projects**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **S. No** | **Title of the**  **Project** | **Major/**  **Minor** | **Role**  **(PI / Co.PI.)** | **Funding Agency** | **Amount Sanctioned** | **Duration** | **Ongoing/ Completed** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. **Research Papers Published (in numbers)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Refereed Journals (SCI & Scopus / WOS) with Impact Factor** >**1** | | | |
| **International** | | **National** | |
| **As First Author** | **As Co Author** | **As First Author** | **As Co Author** |
|  |  |  |  |

**Note: Science Citation Indexed / Scopus / WOS Approved Journals only(Negative Marks for Other Journals listed here)**

1. **Books Published**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Publishers** | **No. of books published** | **ISBN/ISSN**  **Number** | **Copy Right Number** | **Sole Author** | **Co - Author** | **In Chapters** |
| International  Level |  |  |  |  |  |  |
| National Level |  |  |  |  |  |  |
| Others/Local |  |  |  |  |  |  |

1. **Paper Presentation in Seminar/Conferences/Symposium/Workshop(in numbers)**

|  |  |
| --- | --- |
| **National Level** | **International\*** |
|  |  |
|  |  |

**\*Outside India only**

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1. **Seminars/Events Organized(in numbers)**

|  |  |
| --- | --- |
| **National Level** | **International\*** |
|  |  |
|  |  |

**\*Outside India only**

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1. **As Chairperson in Seminar/Conferences/Symposium/Workshop/ Resource Person**

**(in numbers)**

|  |  |  |
| --- | --- | --- |
| **State** | **National Level** | **International**  **(Organized Abroad)** |
|  |  |  |
|  |  |  |

1. **Visits Abroad**

|  |  |  |
| --- | --- | --- |
| **S. no** | **Country** | **Purpose** |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Research Activities (in numbers)**

Any projects in collaboration with

* National Companies/Industries/Research Organizations
* International Companies/Industries/Research Organizations

1. **University Assignments / Representation**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.No** | **University Bodies** | **University** | **Period** | |
| **From** | **To** |
| 1 | Syndicate Member |  |  |  |
| 2 | Senate Member |  |  |  |
| 3 | Chairman-Board of Studies |  |  |  |
| 4 | Member-Board of Studies |  |  |  |
| 5 | Chairman–Examination |  |  |  |
| 6 | Member AICTE/UGC/University inspection commission / University Standing Committee |  |  |  |
| 7 | Any Other Responsibilities |  |  |  |

1. **Ph.D. Viva Voce (in numbers)**

As External Examiner

1. **Awards/ Recognitions**
2. **Projects Outcome/Outputs(in numbers)**

**Patent/Technology Transfer/Product/Process**

1. **Patent Details :**
2. **Membership Bodies Details :**
3. **Any Other**

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***Please Mention:***

Are you a recipient of Best Faculty Award from NGI? / If yes furnish the details of Discipline, Category and the year.

**Yes ** **No**

**N.B**:

1. No documents are required to be attached with the application
2. Short listed candidates should attend the interview on at Nehru Arts and Science College, Nehru Gardens, Thirumalayampalayam, Coimbatore – 641 105 with the following:
   1. A copy of the attested supporting documents
   2. All original Documents
   3. Two photographs
   4. Power point presentation(for15 minutes)

Out state applicants shall attend the interview online/offline based on their preferences

1. The score of the presentation and interview will be added to the total merit of the candidate as per the application,
2. Marks will be awarded on the basis of verification of original documents.
3. The candidates top in the presentation and interview shall be awarded on at a prestigious and solemn function at P K Das Auditorium.
4. Invitation will be sent to all the winners.
5. The completed applications should be submitted on or before.
6. **Those who have already received the NGI Best Faculty Award are not eligible to apply for five years**.

**Declaration**

I hereby declare that the information furnished is true to the best of my knowledge.

Name :

Signature :

Date :

**Certificate**

Certified that I have verified the facts furnished above and found to be true.

Forwarded for consideration

PRINCIPAL/REGISTRAR

(Name and Signature)

**Note: Certificates (Original and Copies to be brought for the Interview)**

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