

**Department of Pharmaceutical Sciences,  
Saurashtra University,  
Rajkot – 360 005 (Gujarat)**



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Re-accredited Grade “A” by NAAC

**APPLICATION FORM FOR THE POST OF PROFESSOR / ASSOCIATE PROFESSOR**

Full Name of the Candidate: \_\_\_\_\_

Specialization (Master Degree) with: \_\_\_\_\_

**Total API Score calculated as per Annexure III:**

\_\_\_\_\_ (from Category III)



Re-Accredited Grade 'A' by NAAC

# SAURASHTRA UNIVERSITY

University Campus  
University Road,  
RAJKOT – 360 005

## Professor / Associate Professor Application Form

**Post Applied for** :- \_\_\_\_\_ **Department** :- \_\_\_\_\_  
**Category** :- \_\_\_\_\_ **Scale** :- \_\_\_\_\_

### PART - A GENERAL INFORMATION AND ACADEMIC BACKGROUND

- 1) Name (in Block Letters) :- \_\_\_\_\_
  - 2) Father's Name / Mother's Name :- \_\_\_\_\_
  - 3) Current Designation & PB and AGP :- \_\_\_\_\_
  - 4) Date of Birth :- \_\_\_\_\_
  - 5) Birth Place :- \_\_\_\_\_
  - 6) Sex :- Male / Female
  - 7) Marital Status :- Married / Unmarried
  - 8) Nationality :- Indian / \_\_\_\_\_
  - 9) Category :- SC / ST / SEBC / PH / GEN
  - 10) Address for Correspondence :- \_\_\_\_\_  
(with Pin Code) \_\_\_\_\_  
\_\_\_\_\_
  - 11) Permanent Address :- \_\_\_\_\_  
(with Pin Code) \_\_\_\_\_  
\_\_\_\_\_
- Tel. No. / Mobile No. \_\_\_\_\_
- Email Address \_\_\_\_\_

**12) Academic Qualifications (Metric Till Post Graduation) :-**

<b>Examinations</b>	<b>Name of the Board / University</b>	<b>Year of Passing</b>	<b>Percentage of marks obtained</b>	<b>Division / Class / Grade</b>	<b>Subject</b>
High School / S.S.C.E.					
H.S.C.E.					
Graduation (B.Pharm/ B.A. / B.Sc./ B.Com. etc..)					
Post Graduation (M.Pharm/ M.A. / M.Sc./ M.Com. etc..)					
Other Examinations if any					

**13) Research Degree(s) :-**

<b>Degrees</b>	<b>Title</b>	<b>Date of award</b>	<b>University</b>
M. Pharm/M. Phil			
Ph. D. / D. Phil			
D.Sc. / D.Litt			
Other			

**14) Appointments held Prior to this Application :-**

<b>Designation</b>	<b>Type of Appointment</b>	<b>Name of Employer</b>	<b>Period</b>		<b>Pay with AGP</b>	<b>Reason of leaving</b>
			<b>Joining</b>	<b>Leaving</b>		

15) **Period of teaching experiences :** P.G. Classes (in years)   
(Fulltime in Scale) U.G. Classes (in years)

16) **Research Experiences excluding years spent in M.Phil. / Ph.D. : (in years)**

17) **Fields of Specialization under the Subject / Discipline :**

(a) ..

(b) ..

(c) ..

18) **Academic Staff College Orientation / Refresher Course attended (or equivalent) :-**

Name of the Course / Summer School	Place	Duration	Sponsoring Agency
1)			
2)			
3)			
4)			
5)			

19) **NET / GSLET/ JRF / GATE /GPAT/ etc. :- Passing Date** \_\_\_\_\_  
(Please attached Certificate )

20) **Gold Medals** :- \_\_\_\_\_  
(If required, please attached separate sheet) \_\_\_\_\_

**PART - B**

**ACADEMIC PERFORMANCE INDICATORS (API)\* - CATEGORY - III**

**(Only for the Post of Professor & Associate Professor)**

**RESEARCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS**

**A) Published Papers in Journals**

Sr. No.	Title with page nos.	Journal	ISSN / ISBN No	Whether peer reviewed impact factor, if any	No. of Co-Authors	Whether you are the main author	API Score

**B) (i) Articles / Chapters published in Books**

Sr. No.	Title with page nos.	Book Title Editor & Publisher	ISSN / ISBN No	Whether peer reviewed	No. of Co-Authors	Whether you are the main Author	API Score

**(ii) Full Papers in Conference Proceedings**

Sr. No.	Title with page nos.	Details of Conference Publication	ISSN/ISBN No	No. of Co-authors	Whether you are the main author	API Score

**(iii) Book Published as single Author or as Editor**

Sr. No.	Title with page nos.	Type of Book & Authorship	Publishers & ISSN / ISBN No	Whether peer reviewed	No. of Co-Authors	Whether you are the main author	API Score

**C) Ongoing and Completed Research Projects :-****(i) Ongoing Projects**

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized ( ` Lakh)	API Score

**(iii) Completed Projects**

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized ( ` Lakh)	Whether Policy Document / Patent as outcome	API Score

**D) Research Guidance**

Sr. No.	Number Enrolled	Thesis Submitted	Degree awarded	API Score
M. Phil or equivalent				
Ph. D. or equivalent				

**E) (i) Training Courses, Teaching - Learning - Evaluation Technology Programmes, Faculty Development Programmes**  
(not less than one week duration)

Sr. No.	Programme	Duration	Organised by	API Score

**(ii) Papers presented in Conferences, Seminars, Workshops, Symposia**

Sr. No.	Title of the Paper presented	Title of Conference / Seminar	Organised by	Whether International / National / State / Regional / College or University level	API Score

**(iii) Invited Lectures and Chairmanships at National or International Conferences / Seminar etc.**

Sr. No.	Title of Lecture / Academic Session	Title of Conference / Seminar etc	Organised by	Whether International / National	API Score

## SUMMARY OF API SCORE

### *Category - III (Research and Academic Contribution)*

<i>No.</i>	<i>Category</i>	<i>API Claimed</i>	<i>Capping Percentage</i>	<i>Actual API after Capping</i>
<i>III (A)</i>	<i>Research Papers (Journals)</i>		<i>30 %</i>	
	<i>Conference proceedings as full papers</i>			
<i>III (B)</i>	<i>Book Publications</i>		<i>25 %</i>	
	<i>Book Chapters</i>			
<i>III (C)</i>	<i>Research Projects</i>		<i>20 %</i>	
<i>III (D)</i>	<i>Research Guidance</i>		<i>10 %</i>	
<i>III (E)</i>	<i>Training Courses</i>		<i>15 %</i>	
	<i>Papers in Conferences / Seminars / Workshops etc.</i>			
	<i>Invited Lecturers or presentations for Conference / Symposia</i>			
	<b><i>Total API</i></b>			

***Signature of Applicant***



**PART - C**

**OTHER RELEVANT INFORMATION**

Please give details of any other credential, significant contributions, awards received etc. not mentioned earlier. (If required, please attached separate sheet)

Sr. No.	Details (Mention Year, Value etc. wherever relevant)

**LIST OF ENCLOSURES :-**

(Please attach Copies of Certificates, Sanction Orders, Papers etc. wherever necessary)

- |    |     |
|----|-----|
| 1) | 6)  |
| 2) | 7)  |
| 3) | 8)  |
| 4) | 9)  |
| 5) | 10) |

Signature of the Applicant

Date :-

Place :-

I certify that the information provided is correct as per records available with the department / university and/or documents enclosed along with the duly filled API proforma.

Signature of HOD with Seal

.....  
**N.B. :-**

1. The individual API proforma duly filled along with all Enclosures, submitted for Direct Recruitment will be duly verified by the University as necessary and placed before the Screening / Evaluation Committee / Selection Committee for assessment / verification.
2. Applicant in Service is required to forward his / her application through proper channel.