



University of Swat

Meetings Section, House No. 14, Sector F, Kanju Township Swat

www.uswat.edu.pk

Cell / WhatsApp No. 0334-8923011 Tel: 0946-730504

Email: Meetings@uswat.edu.pk , Khurshid@uswat.edu.pk

Form No. _____

Attach two recent pictures here

EMPLOYMENT FORM FOR MAIN CAMPUS, KANJU SWAT

For (BPS OR TTS)

Bank Draft/University Receipt No. _____ Dated: _____	Post applied for _____
Bank Name: _____	_____

A. PERSONAL INFORMATION:

1. Name (in block letters) _____
2. Father's Name (in block letters) _____
3. (a) Date of Birth _____ (b) Domicile _____
(c) Land Line _____ (d) Mobile _____
(e) CNIC No. _____ (f) Email _____
4. Permanent Address _____
5. Mailing Address _____

B. ACADEMICS & PROFESSIONAL:

i) ACADEMIC DATA

Attach attested photocopies of degrees / transcripts, which clearly indicate the courses undertaken and the grades obtained by you during graduation/Post Graduation/Ph.D etc.

Qualifications	Duration (Month/Year)		Division	Marks Obt/ Total Marks/ CGPA	Subject/ Major Field of Specialization	Full/ Part Time Regular/ Private	Board / University/ Institute/ Country
	From	To					
Postdoctoral							
Ph.D							
M.Phil/MS							
Masters/ Equivalent							
Bachelors/ Equivalent							
Intermediate/ Equivalent							
Matric/ Equivalent							

ii) Please provide the following information:

(a) Title of M.Phil. Thesis: _____

(b) Name of M.Phil. Supervisor: _____

(c) Title of Ph.D. Thesis (If Applicable): _____

(d) Name of Ph.D. Supervisor (If Applicable): _____



iii) **TEACHING/PROFESSIONAL EXPERIENCE** (Must attach experience certificate(s) to support your experience(s))

After	Post/(BPS)	Duration (Month/Year)		University/Institute/ Organization/Country
		From	To	
Ph.D				
M.Phil/MS				
Master & Bachelor				
Other				

iv) **DETAILS OF RESEARCH PUBLICATIONS**

S.#	Name of Author	Name of Co-author (s)	Title of paper/Presentation	Journal (Name & Country)	Publisher	Vol.	Page No.	Impact Factor	Date of Publication
Published in Journal of international repute / HEC recognized / ISI indexed Journals / International Refereed									
1									
2									
3									
4									
Published in local Journals									
1									
2									
3									
4									

(Attached extra sheet, if required)

v) **LIST SIGNIFICANT ACADEMIC AWARDS/MERIT SCHOLARSHIPS/MEMBERSHIP etc.** (Attach supporting documents)

a.	_____
b.	_____
c.	_____
d.	_____



A- List of Publications in Journals Having IF (Impact Factor)
 (To be filled by the Applicant – For Professor and Associate Professor only)

S#	Name of Author	Complete Name of Journals and Address	Title of the Publication	Vol. No. & Page No.	Year Published	Impact Factor

(Please attach separate list on the same format, if, required)

* For all Science Disciplines publications only in Impact Factor (IF) Journals are acceptable for appointment under TTS. Impact Factor of a particular journal can be checked from <http://www.isiknowledge.com>.

Declaration:

I Dr/Mr./Ms. _____ hereby solemnly declare that all the entries/information provided by me for appointment under TTS is correct and true in all respects. If it is found fake or having incorrect information, at any point of time, the undersigned is liable for the penalty to be decided by the competent authority and my appointment may be cancelled.

Date: ____/____/_____ Signature: _____



B- List of Publications in Journals recognized by the HEC for the purpose of TTS Appointments other than Sciences
(To be filled by the Applicant – For Professor and Associate Professor)

S#	Name of Author	Name of Journals / other contributions that come under defined categories.	Categorized by HEC as W/X/Y/Z	Vol. No. & Page No.	Title of the Publications / Others	Year Published

(Please attach separate list on the same format, if, required)

* Journals recognized by the Higher Education Commission (HEC), for the purpose of TTS appointment. For details you may visit “HEC Recognized Journals” on the website of the HEC: <http://www.hec.gov.pk>.

** HEC website may be visited for details about the categorization of journals and their applications.

Declaration:

I Dr/Mr./Ms. _____ hereby solemnly declare that all the entries/information provided by me for appointment under TTS is correct and true in all respects. If it is found fake or having incorrect information, at any point of time, the undersigned is liable for the penalty to be decided by the competent authority and my appointment may be cancelled.

Date: ____/____/____ Signature: _____

<p>Declaration:</p> <p>I Dr/Mr./Ms. _____ hereby solemnly declare that all the entries/information provided by me in the application form for appointment under TTS is correct and true in all respects. If it is found fake or having incorrect information, at any point of time, the undersigned is liable for the penalty to be decided by the competent authority and my appointment may be cancelled.</p> <p>Date: ____/____/____ . Signature: _____</p>

* This information needs to be provided only by those candidates who are applying for the posts of Assistant professor having a Ph.D. degree from Pakistan.



C. REFERENCES:

S#	Name	Designation	Address/Phone/Fax/Email
1			
2			
3			

DECLARATION

I hereby declare that all the entries in this application form and all the additional particulars furnished along with it are true to the best of my knowledge and belief. I understand that any mis-representation / concealment of facts in it can result in the rejection of my application, and even after my selection as _____ shall lead to dismissal / termination from service.

Signature of Candidate (with date)

For Office Use only

RECOMMENDATIONS OF THE SCRUTINY COMMITTEE

The candidate is Conditionally Eligible Eligible Not Eligible

If the candidate is not eligible / conditionally eligible (please state the reason(s) / conditions):

i	
ii	
iii	

NAMES AND SIGNATURES OF EVALUATORS

I) _____/Convener Signature _____

II) _____/Member Signature _____

III) _____/Member Signature _____

IV) _____ Member / Secretary Signature _____

DECISION OF THE APPELLATE COMMITTEE (IF APPLICABLE)

I) _____/Convener Signature _____

II) _____/Member Signature _____

III) _____/Member Signature _____

IV) _____ Member / Secretary Signature _____



D. INSTRUCTION FOR FILLING APPLICATION FORM:

1. Read the form carefully before filling the application form.
2. Attach attested copies of all relevant testimonials/documents and experience certificates as you claim in your application form.
3. DMC / Transcripts / Certificates will only be accepted, if issued by the office of the Controller of Examination concerned.
4. Experience certificate(s) and **NO OBJECTION CERTIFICATE (NOC)** will only be accepted if issued by the Registrar in case of University or equivalent body/ Competent Appointing Authority of the University/Institution/Organization otherwise experience will not be counted and NOC will not be acceptable.
5. The experience certificate(s) must contain issuance date, reference No., proper designation along with BPS/TTS (*If applicable*) and clear duration of experience gained.
6. **Age limit for all regular positions on BPS is 45 years.**
7. If a row or a column is not relevant, write "Not Applicable" or "NA".
8. Phone/Cell No, Mailing Address and Email Address must be communicated in case of any change.
9. Applicants are advised to regularly check University of Swat website and your email for quick information / correspondence.
10. Detailed rules / policy of recruitment may be seen on University website.
11. This application form, duly completed along with supported documents should be submitted to the **Office of Registrar (Meetings Section), University of Swat at Charbagh, Swat** on or before the closing date as per advertisement.

S.No.	Checklist	Attached <input type="checkbox"/> Please Tick (if attached)	Not Applicable <input type="checkbox"/> Please Tick (if not applicable)	Page No (Write page number on the top right corner of the attached documents)
1.	Original Bank receipt/Demand Draft of amount stated in advertisement as application processing fee			
2.	Attested copy of Domicile Certificate.			
3.	Attested copy of CNIC.			
4.	Attested copies of SSC Original Certificate and DMC.			
5.	Attested copies of HSSC Original Certificate and DMC.			
6.	Attested copies of Bachelors DMC/Transcript and Degree.			
7.	Attested copies of Masters DMC/Transcript and Degree.			
8.	Attested copies of M.Phil. Transcript and Degree (<i>If Applicable</i>).			
9.	Attested copies of Ph.D. Transcript and Degree (<i>If Applicable</i>).			
10.	Post Doctorate Certificate (<i>If Applicable</i>).			
11.	Research Publication Evaluation fee of Rs. 4500/- for Professor and Associate Professor only.			
12.	Four Sets (04) of binded Research Publications for Professor and Associate Professor.			
13.	Experience Certificates from Registrar/ equivalent body of concerned University / institution.			
14.	Proper No Objection Certificate (NOC). Issued by Competent Authority/employer			
15.	Attach all research publications (<i>If Applicable</i>)			
16.	Merit/ Gold Medal Certificate (<i>If Applicable</i>)			
17.	HEC/IBCC equivalency certificate in case of foreign degrees/certificates.			
18.	Ph.D. thesis evaluation reports in case of TTS only.			
19.	Signature on Page No.3 of application form.			

ACKNOWLEDGEMENT FOR THE RECEIPT OF APPLICATION FORM

Name of the Candidate: _____ Father Name: _____

Post applied for: _____ Dated: _____

Receipt Diary No. _____ Signature of the Receiver with date: _____

