

Bank Draft/University Receipt No.

WOMEN CAMPUS University of Swat

Meetings Section, Main Campus, Charbagh, Swat www.uswat.edu.pk Email: meetings@uswat.edu.pk Contact #: 0946-730504

Dated: _

Attach one recent pictures here

Post applied for

APPLICATION FORM FOR FACULTY POSITIONS (FIXED PAY)

| | | | | | | | L | | | |
|-------------------------------------|-----------------------------------|--------------|-----------------|-------------------------|----------------------|-------------|---------------------|----------------------------------|--|--|
| A. <u>PERSONAI</u> | . PERSONAL INFORMATION: | | | | | | | | | |
| 1. Name (in block letters) | | | | | | | | | | |
| 2. Father's Name (in block letters) | | | | | | | | | | |
| 3. (a) Dat | 3. (a) Date of Birth (b) Domicile | | | | | | | | | |
| (c) Laı | (c) Land Line (d) Mobile | | | | | | | | | |
| (e) CN | (e) CNIC No (f) Email | | | | | | | | | |
| 4. Permar | | | | | | | | | | |
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| | CS & PROFE ADEMIC DATA | | ach attested ph | otocopies of de | egrees / tran | nscripts. v | vhich clearly indi | icate the courses | | |
| -, <u></u> | | und | | e grades obtaiı | • | | duation/Post Gr | raduation/Ph.D etc. | | |
| Onalifications | Dura (Month | | Diminion | Marks Obt/ | Subje | | Full/ Part Time | Board / | | |
| Qualifications | From | To | Division | Total Marks/ CGPA | Major Fi Speciali | | Regular/ Private | University/ Institute/Country | | |
| Postdoctoral | | | | | | | | | | |
| Ph.D | | | | | | | | | | |
| M.Phil/MS | | | | | | | | | | |
| Masters/ Equivalent | | | | | | | | | | |
| Bachelors/ Equivalent | | | | | | | | | | |
| Intermediate/ Equivalent | | | | | | | | | | |
| Matric/ Equivalent | | | | | | | | | | |
| ii) <u>Plea</u> | ase provide th | ne following | information: | | | | | | | |
| (a) Title of | f M.Phil. Th | esis: | | | | | | | | |
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| iii) <u>TEACHING/PROFESSIONAL EXPER</u> | ENCE (Must attach experience certificate(s) to support your experience(s) |
|---|---|
|---|---|

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

iv) <u>DETAILS OF RESEARCH PUBLICATIONS</u>

| 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 | | | | | | | | |
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| | | | Publ | ished in local Jou | ırnals | | | | |
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(Attached extra sheet, if required)

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| | |
| b. | |
| c. | |
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| \$# | Name | Designation | | Address/Phone/Fax/Email |
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| • | | <u>DECLARATI</u> | <u>ON</u> | |
| rue to the bo esult in the | are that all the entries in this appliest of my knowledge and belief. It rejection of my application, and emination from service. | understand that any | mis-representa | tion / concealment of facts in it |
| | | | | Signature of Candidate (with date |
| | | For Office Use of | al a | |
| | <u>RECOMMENDA</u> | TIONS OF THE SCRU | | <u>itee</u> |
| | The candidate is | Eligible gible (please state | Not Eligible | |
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| | /Conv | vener . | Signature | |
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|) | /Convener | Signature |
|-----|--------------------|-----------|
| 1) | /Member | Signature |
| II) | /Member | Signature |
| v) | 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 and clear duration of experience gained.
- 6. Age limit for all faculty positions is 55 years.
- 7. If a row or a column is not relevant, write "Not Applicable" or "NA".
- 8. Phone/Cell No, Mailing Address and Email ID must be communicated in case of any change.
- 9. Applicants are advised to regularly check University of Swat website and their email for quick information/correspondence.
- 10. This application form, duly completed along with supported documents should be submitted to the <u>Office of the Registrar (Meetings Section)</u>, <u>Main Administration Block</u>, <u>University of Swat at Charbagh</u> on or before the closing date as per advertisement.

| | diosing date as per advertisement. | | | Page No |
|-----------|--|--------------------------------------|--|--|
| S. No. | Checklist | Attached ☑ Please Tick (if attached) | Not Applicable ☑ Please Tick (if not applicable) | (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 (If Applicable). | | | |
| 9. | Attested copies of Ph.D. Transcript and Degree (If Applicable). | | | |
| 10. | Post Doctorate Certificate (If Applicable). | | | |
| 11. | Experience Certificates from Registrar/ equivalent body of concerned University / institution. | | | |
| 12. | Proper No Objection Certificate (NOC). Issued by Competent Authority/employer | | | |
| 13. | Attach all research publications (If Applicable) | | | |
| 14. | Merit/ Gold Medal Certificate (If Applicable) | | | |
| 15. | HEC/IBCC equivalency certificate in case of foreign degrees/certificates. | | | |
| 16. | Signature on Page No.3 of application form. | | | |

