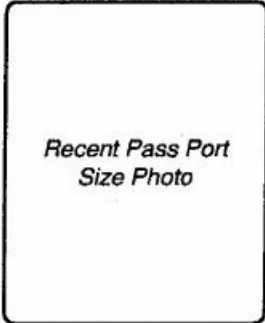




**UNIVERSITY OF MYSORE**  
**UGC-HUMAN RESOURCE DEVELOPMENT CENTRE (HRDC)/ASC**  
 MANASAGANGOTRI, MYSORE-570 006

**APPLICATION FORM FOR ORIENTATION / REFRESHER COURSE**  
*(Underline the required course)*

Subject.....



*Recent Pass Port  
Size Photo*

1. Name of the Teacher :
2. Date of Birth and Age :
3. Sex : Male / Female :
4. (a) College / Institution Address with Pin Code and Phone Number / Fax / E-mail :
- (b) Residential Address with Pin Code and Phone No. / Fax / E-mail :
5. Particulars of Reservation category (SC / ST / OBC / GM) :
6. Designation of the Teacher (Lect. / Sr. Scale Lect. / Sl.Gr.Lect.) :  
 Present Basic Pay.....  
 Scale of Pay.....
7. University to which the College is Affiliated

8. Academic Records of the Teacher :

Degree	Class / Rank	Subject Specialisation	Year of Pass	University

9. Research Activities / Publications if any :

10. Have You attended Orientation Programme / Refresher Course earlier : Yes / No  
 If Yes furnish the details

Programmes /Courses	Name of the Academic Staff College	Date (From and To)

11. Give Justification for your Participation in the Course and any other information the teacher wishes to furnish

I Declare that the information furnished above is true to the best of my knowledge and in case of any lapse(s) I will be held responsible.

Date :

*Signature of the Teacher*

**FORWARDING NOTE**

Certified that Sri / Smt.....has been working as Lecturer / Senior Scale Lecturer / Selection Grade Lecturer in..... on permanent / Temporary / Tenure / Guest Faculty (Full Time or Part Time) basis. He / She completed years of Teaching Experience. His / Her appointment is through the Board of Appointment / Subject Experts of the College / Management. The date of appointment is.....and date of reporting to duty is.....He / She has attended / not attended.....(No. of Courses) Orientation Programmes / Refresher Course. He / She will be relieved from the College / Department for the duration of the Orientation Programme / Refresher Course, if selected.

Certified that this College is included in the list under Section 2 (f) of the UGC Act.

Date :

*Principal/Head of the Institution/Chairperson*  
*Affix Office Seal*