

**Application for the Post of Visiting Lecturer
Academic Year 2025 – 2nd Semester - SLIATE**

	Preferred place (ATI) to serve	Preferred Programmes & Subject areas
1		
2		
3		

1. Name in Full (Dr./Mr./Mrs./Miss.).....

2. Name with Initials

3. Date of Birth

4. Contact Information

Postal Address-.....

.....

Phone Number- Official -.....

Mobile -..... E-mail -.....

5. Academic Qualifications:

	Name of the Degree	Name of the University	Year
i.
ii.
iii.

6. Professional Qualifications

	Name of the Qualification	Name of the Institute	Year
i.
ii.

7. Other Qualifications

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8. Working Experience

	Position	From	To	Years
Present				
Past				

9. Teaching Experience:-

Institute	Name of Programmes	Subject	Number of Years

10. Name, Position and Contact Information of Two Non-related Referees.

Applicants who are attached to the Government and Statutory Bodies should forward their applications through their Head of the Department.

I hereby certify that all the above information is true and correct for the best of my knowledge.

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Date

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Signature of Applicant

To be completed by the present employer (if any)

Applicant can / cannot be released, if he/she is selected for this position.

Any special comments:

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Signature of Head of the Department

Official Stamp:-.....

Date :-