



INSTITUTE OF CHEMICAL TECHNOLOGY

(University Under Section-3 of UGC Act 1956)
N.M. Parekh Marg., Matunga, Mumbai – 400 019
Tel No. 91-022-3361111, 3361222
www.ictmumbai.edu.in

PHOTO

APPLICATION FOR FACULTY POSITION / C.A.S. PROMOTION / SCIENTIST (A/B/C)

(N.B. Send the entire docket as a pdf file with the following file name: Last name-initials-post name-department name-serial number of post if advertised. Use appendices for additional information if the space provided is insufficient. Number the appendix as per the Section number in this application.)

To,

Registrar
Institute of Chemical Technology
N.M. Parekh Road,
Matunga, Mumbai – 400 019
Email: registrar@ictmumbai.edu.in

Date of Advertisement
Date of Announcement of C.A.S.
(Only for internal faculty)
Serial Number of Post

Application for the post of Associate Professor/ Assistant Professor in **Department of Mathematics**

1. Name in full :
(Beginning with Surname
and in Block Letters)

2. Postal Address in Full
(in Block Letters)

Postal Code/PIN Country:

3. Tel. No.(Res.) : Cell No. :
(Off.) : Email: Office :
Personal:

4. Date of Birth : 5. Age :
dd-mm-yyyy

6. Place of Birth : 7. Gender : Male / Female

State : 8. Martial status: Married / Single / Divorced

Country : No. of Children (if applicable) : Sons : Daughters :

8. Nationality : 9. Category: Open :
Reserved : SC/ST/DT/NT/OBC/VJ/Any other:

10. Educational Qualifications :

Examination	University/ Board	Month and year of passing	Subjects (degree onwards)	Percentage of marks obtained or GPA	Class/ Division
S.S.C. or Equivalent					
H.S.S.C./pr e-University					
Bachelor's Degree					

Master's Degree					
Ph.D.					
Post-doctoral Fellowship					

11. NET/SET/Any other examination relevant to the application:
(Subject, Year, Examining Body) (Attach a photocopy of the result)

12. Account for breaks in academic career if any, Nature of Break : Period of Break (with dates) :

13. a) Experience :

Organization	Position / Title	Nature of Appointment (Permanent / Temporary)	Period of Appointment (with dates)

(Use additional sheet if necessary as Appendix 13)

b) Teaching Interests : (*Strike out whichever is not applicable*)

i) I would like to teach the following courses/subjects.

ii) I have already taught the following courses/subjects.

Sr. No.	Course / Subject	UG / PG Degree	i / ii

iii) My grading by the students was excellent/very good/good/average/never done.

iv) My grading by students was confidential and not known to me.

v) I would like to develop new courses in the following areas:

a)

b)

c)

d)

vi) I have no formal teaching experience.

c) Research Interests (Broad areas and specific areas)

Current :

Future :

14. Other qualifications and experience, if any *:

15. Salient features of the research work done or directed * :

- A) Master's Research and publications if any, (Appendix 15 A)
- B) Ph.D. Research and publications if any, (Appendix 15 B)
- C) Post-Doctoral Research and publications if any, (Appendix 15 C)
- D) Research work done in last 5 years (Appendix 15 D)

(Attach separate sheets giving importance of research conducted in about 200 words and give details of publications from only peer-reviewed journals. Give impact factor of the journal and citation statistics. Consult "web of science".)

16. Number of students successfully guided* (For C.A.S. the following categorization is required) :

Name of the Student	Title of Thesis	Degree & University	Year	Current Occupation, If known
Category : I Prior to the current appointment as				
Category : II After the current appointment as				

17. Number of Research projects executed (give details of title, funding agency, period, total amount, major outcome, whether, PI / Co-PI) * :

18. Professional Service : (Attach Appendix 18 covering the following)

- a) Affiliation with Professional Bodies
 - i) Elected Fellowships (e.g. INSA, IASc, NASI, MASc, etc.)
 - ii) General Fellowships (elevation by application to a higher category from membership, typically based on experience as member of that body)
 - iii) Membership (Professional societies, institutes, associations, alumni associations, all by applications and not by election by peers).
- b) Office bearer of Professional Bodies, Conferences, Symposia etc.
- c) Membership of In-house Committees.
- d) Resource Generation through Personal Initiation for Professional Bodies or the Organisation where employed (if applicable)

19. Future plans: I have prepared or will prepare research proposal(s) in the following areas which are ready to be submitted to a funding agency or can be submitted.

Title of Project	Amount Rs.	Possible Funding Agency

20. Publications: (authors, in the same order as they appear, title, journal, year, volume, page, impact factor of the journal, citations received). Separate the publications in the following categories.

Category I : Prior to current appointment (required for C.A.S.)

Category II : After the current appointment (required for C.A.S.)

(Papers based on students guided by self should be marked in bold)

(a) Number of research publications in peer reviewed journals:

(b) Number of other publications in non-peer reviewed journals:

21. Papers presented in conferences/meetings/symposia. If the proceedings are peer-reviewed and published, state them. Otherwise they are not given any weightage as publications.

22. Impact Factor Analysis : (a) Total citations: (b) h-index :

No.	Journal	I.F.	No. of papers (N)	I.F. x N	Total No. of authors including self (A)	No. of citations (C)	Citations for self (C/A)
Total							

23. Patents, if any: (give details title, inventors, assignee, No., date, whether exploited and by which company) (Attach Appendix 23).

(a) Number of patents applied for:

(b) Number of patents granted:

(c) Number of patents exploited:

24. Awards and Honors:

Year	Name of the Award	Awarding Organisation

(Attach a separate Appendix 24 for awards, if this space is insufficient).

25. (a) Title of Present Position :

(b) Name of Organisation where employed:

(c) Salary Structure:

Pay Rs. in the pay-scale of Rs.

D.A. Rs.

H.R.A. Rs.

C.L.A. Rs.

Other

Allowances,

if any Rs.

(d) Date of appointment:

(e) Date of next increment:

TOTAL Rs.

(Enclose a certificate from the employer stating the pay and allowances drawn at present.)

26. Names of persons who have given testimonials: (without testimonials the applications will be treated as incomplete)

Testimonials will be from persons who are familiar with the applicant's credentials and qualifications. The person giving the testimonial must not be related to the applicant and should be fully aware of the credentials.

1.
2.
3.

27. Personal Vision and Mission (if any)

(Please provide a brief statement, not more than 200 words, as to your personal vision and mission and efforts you would take to achieve them) (Appendix 27)

28. Names and complete addresses of not less than three persons to whom reference will be made by this office.

No.	Name	Title and Address	Telephone & Fax	Email
1.				
2.				
3.				
4.				
5.				

29. Miscellaneous :

(Any other points relevant to your application which are not covered above, as Appendix 29. This may include service to society.)

Declaration :

I hereby declare that I have carefully gone through all the “**instructions to the candidates**” attached with this application form and agree to abide by the conditions mentioned therein. I also declare that all statements made by me in this application are true, complete, and correct to the best of my knowledge and belief. I understand that in the event of any information being found to be false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated. I further understand that no notice shall be taken of any request for withdrawal of my application. I also understand that I will be given a fair chance to present my work and credentials at the time of interview, based on merit of my case and the various rules and regulations in place. I will submit one hard copy of the application with photo copies of all necessary documents. The pdf will be submitted by email to the institute.

Place:

Date :

(Signature of candidate)

N.B. Please use a proper file name and send a pdf file to registrar@ictmumbai.edu.in