



PROFORMA
UGC - ACADEMIC STAFF COLLEGE,
GUJARAT UNIVERSITY
AHMEDABAD – 380009



APPLICATION FORM
ORIENTATION / REFRESHER COURSE

Pass-port
size
Photograph
to be pasted
here.

To
The Director, Academic Staff College,
Gujarat University, Ahmedabad-380 009.

1. Name (start with surname) : _____
2. Designation : _____
3. Subject : _____ Degree _____
4. Complete address of the College : _____
: _____
: _____
Telephone No. with STD Code : _____
5. University to which the College is affiliated : _____
6. Address for Correspondence : _____
: _____
: _____
Telephone No. (STD Code) : _____
Mobile No. : _____
7. Educational Qualifications :

Name of Degree	Subject	Specialization
8. Status : On Probation / Permanent
9. Date of Joining on 1st Lecturership appointment : _____ at _____
Date College
10. Scale of Pay & Basic Pay : Scale :Rs _____
Basic Rs. _____
11. Status of the College : Govt. / Aided College / Self finance College
12. Establishment year of your College / Institution : _____
13. Break-Up of Teaching Experience at degree level :

Name of University / College	Full-time	Experience Total Y/M
	From to	
	From to	
	From to	
14. Birth Date _____ : Age _____ Years
15. Sex : Male / Female
16. Whether SC / ST / OBC / OPEN : _____
17. State / Union Territory : _____
18. Particulars of Orientation Programmes/ Refresher Course completed by me so far

OP / RC	University	Date
		From to
19. Please indicate the shortest route : _____
from your place of work along with
the mode of transport (Bus / Train)
20. Enclosed DD No. _____ dated _____ of Rs. 500/- in favour of
"Director, Asc, Gujarat University, Ahmedabad."

P.T.O.

21. The particulars given above are correct and I accept full responsibility for the same.

Date : _____

Signature of the Applicant

Note : If the information given above is incomplete in any respect, the form will not be considered.

(For Forwarding Authority only)

Certified that the college is within the purview of Section 12 (B) of the U.G.C Act. The applicant will be relieved on selection for the course. The particulars as stated by him/her are true to the best of my knowledge. More over the affiliation No. and date of this college is _____ Date _____

Signature of the Forwarding Authority & Office Seal.

Send Completed form to :

Director, Academic Staff College, School of Social Sciences Building, Gujarat University, Navrangpura, Ahmedabad-380 009.

Email : asc@ascgujarat.org, Phone : 079-26302962, Fax : 079-26305010

You can visit us on www.ascgujarat.org.

RULES

- 1) Lecturers working in universities and colleges that are included under Section 2(f) of the UGC Act, even though they may not yet be fit under Section 12 (B), may be invited to participate in the orientation and refresher courses. The teachers of colleges that do not yet come within the purview of Section 2(f), but have been affiliated to a university for at least five years, will be permitted to participate in the courses.
- 2) The course is full time & residential.
- 3) Orientation Programme will be of 4 weeks duration with minimum of 24 working days and 144 contact hours (6 hours a day); refresher course will be of 3 weeks with minimum of 18 working days and 108 contact hours (6 hours a day) excluding Sundays and public holidays.
- 4) As this is time based programme, you will not be permitted to remain absent even for a single lecture.
- 5) The teacher may opt for a refresher course after a one-year gap following an orientation course. Also, there should be a minimum gap of one year between two refresher courses, though it may be relaxed if an adequate number of participants is not available or it is essential for the teacher to fulfil eligibility conditions for career advancement.
- 6) Every participant shall pay an admission fee (non-refundable) of Rs.500/- at the time of admission.
- 7) You will be provided T.A. (To and Fro) of the shortest route either by express bus or IInd sleeper train.
- 8) You will provided free boarding and lodging.
- 9) If any type of indiscipline in found during the course, you will not be given course completion certificate.
- 10) Application forms which are not sent through the Principal Concerned Authority will not be considered.

FOR OFFICE USE ONLY

▪ OP/RC in : _____ Remarks : _____
▪ Inward no. : _____
▪ Inward Date : _____
▪ Date of OP : _____ Instruction : _____
▪ Date of last OP/RC : _____