

D. Y. PATIL EDUCATION SOCIETY (DEEMED TO BE UNIVERSITY), KOLHAPUR Web: www.dypatilunikop.org, E-mail: info@dypatilkolhapur.org

ENGAGING PROFESSOR OF PRACTICE

From		
	Paste the Photograp	
To The Registrar, D. Y. Patil Education Society		
Deemed to be University, Kolhapur (MS) 416006		
Sir,		
Sub: Application for Engaging Profess	sor of Practice in the departme	ent of
(Name of the Institution)		
With reference to the subject mentioned above Professor of Practice as per UGC Guidelines.		ngaging
1. Full Name		
2. Address for Correspondence		
3.Permanent Address		
4.Date of Birth (DD/MM/YY)		
5.Contact Nos.	Mobile No. :STD E-Mail :STD	
6. Nationality		
	1	

8.Details of qualification: (Whatever applicable)									
Sr. No	Qualification	Name of the Institution	Name of the Board/University	Year of Passing	%of Marks obtained				
1	UG Degree								
2	PG Degree	Category							
3	Ph.D.	- Category							
4	Others, if any								

Experience					
Name of the Organization/Industry	Date of Joining	Date of Leaving	Post held	Last Salary drawn	Reasons for leavin
Proven expertiseAny other experie	•	ecific profe	ession or ro	ole : :	 ;
10. Any other relevant in any other Association		(distinctio	ns conferre	ed, rank/ medals	s, membership with
 11. Details of Research/II Areas of Interest List the projects h Any other inform 	of Researc nandled an	h: d their out	lay:		
12. In selected, joining ti	me require	ed	:	(days/month(s)
I request you to kindly co of the relevant certifica information. Thanking You	- ·			-	· ·
manking rou				Yours	faithfully,
					•
Date:				Sig	nature
Encl.:					