



APPLICATION FORM FOR ASSISTANT PROFESSOR

Subject : _____
Applied Category: _____
Reference : _____
Date of Submission: _____

Affix a recent
passport size
photograph
here

Name in full (In Block Letters): Dr./Mr./Mrs./Ms. _____

Date of Birth (DD/MM/YYYY): / /

Father's Name: _____

Permanent Address: _____

_____ Pin Code _____

Tel. No (with STD code) _____ Mobile _____

E-mail ID: _____

State of Domicile: _____

Nationality: _____ Mother Tongue _____

Category Details: Open/Reserved (Please attached necessary Documents)

Religion: _____ Caste: _____ Category: _____

Physical Disability Yes/No Percentage of Disability: _____

Educational Qualifications:

Sr. No.	Degree	University	Percentage	Year of Passing	Photo Copy attach
1.	B.A./B.Com.				
2.	M.A./M.Com				
3.	SET				
4.	NET				
5.	M.Phil				
6.	Ph.D.				
7.	Other				

Declaration:

I certify that the above information is correct and complete to the best of my knowledge and belief

Place:

Date: / /

Signature of Candidate

Note:

1. Application form available on our college website <https://www.ambedkarcollege.co.in>
2. Filled application form with all details by attaching self-attested required copies of documents Send by post or by hand on address following Address

**The Principal,
Dr. Babasaheb Ambedkar Mahavidyalay
Peth Vadgaon, Tal: Hatkangale,
Dist- Kolhapur 416112**