

Photo

## **Co-operative Academy of Professional Education (CAPE)**

I<sup>st</sup> Floor, Co-Bank Towers, Vikas Bhavan P.O., Thiruvananthapuram – 695 033 Phone(Office): 0471-2316236; Fax: 0471-2310049

	Applica	tion for the Post of <b>Professor</b>	:; Departme	nt		
1.	Name in full (in capital letters)					
2.	Permanent address					
3.	Address to which communications to be sent along with contact number(s).					
4.	Age (in completed years as on 01-01-2014) and Date of birth in Christian Era					
5.	Sex					
6.	Place of bin	th(Village, Taluk, District &	State)			
7.	Religion and Caste  (a) In the case of OBC/OEC categories Non Creamy layer certificate issued by the concerned Revenue authority should be furnished for claiming reservation benefits.  (b) In the case of SC/ST candidates Caste certificate from the concerned authority should be produced for claiming reservation benefits.					
8.	Are you (a) citizen of India by birth and/Or by domicile? (b) If not furnish details					
9.	Qualification					
Name exam passe	ination	Name of University/Board/Council etc.	Year of Passing	Class, Rank etc.	Percentage of Marks	Subject of examination
B.E/B.Tech						
M.E/M.Tech						
10.	Research Degree (Give full details with subject specialisation, name of Institute or University and Professor under whom worked etc.)					

11.		Doctoral qualifications with sity/Institute	name of the					
12.	Details	Details of Books published, if any. (Separate list may be attached, if necessary)						
12.	Sl.No	Name of Book	Year of Publishing	Subject	Co-Authors			
13.	Details	Details of Research Papers published(International/National), if any.						
	Enclos	e reprint of the best papers(about f	ive) in your judge	ement				
	(Separ	ate list may be attached, if necessa	ary)					
	a.	Journals						
	Sl.No	Author(s)	Year	Title of paper	Complete reference of Journal/Conference			
	b. (	b. Conferences						
14.	Employment Experience : (Separate list may be attached, if necessary) Teaching Experience/Industrial Experience/Administrative Experience  a. Teaching/Research Experience			ecessary)				
	Sl.No	Institute/Universit Organization	Institute/University Organization		Area(s)			

[						
	b. Industrial Experience					
-	Sl.No	Duration	Organization	Title of Project and Nature of work	Designation	
_						
	c. Administrative Experience					
<u>-</u>	Sl.No	Duration	Organization	Nature of Responsibility	Designation	
-						
	<u> </u>					
15.	Project guided Under graduate level/P.G level/Ph.D					
16.	Present employer's full address(if any)					
17.	Any additional information which the candidate wishes to give in support of his application					
18.	Particulars of documents produced to prove credentials					
19.	Details of DD		DD No. :			
				DD Date :		
				Name of Bank:		
20.	References 1.					
	2.					

I hereby certify that the information given above is correct to the best of my knowledge and belief. I agree to bind myself to the conditions of service of CAPE that frammed from time to time.

Place	:	Signature of the applicant
Date	:	Name in block letters

For office use only