



STAFF PROMOTION (Cadre / Pay) CAS APPLICATION FORM

For the Academic Year: - Date of Submission:

01. Name (in Capital Letters) : Dr. /Mr. /Mrs. /Ms.

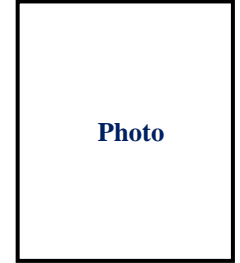
02. Designation & Department :

03. Institution Details : BIST (Engineering & Technology / Architecture /
Mark (✓) on the institution Arts & Science / Agriculture / MBA / Law /
relevant to yours Pharmacy / Nursing)

04. Area of Specialization :

05. Cadre/Pay details of Applicant:

Description	At the Time of Joining	At Present	Applying For
Joining / Promotion / Application Date			
Designation			
Pay			



06. a) Date of Birth & Age : Date: Age:

b) Place of Birth :

c) Nationality :
(With District)

d) Religion : HINDU/CHRISTIAN/MUSLIM/OTHERS

e) Community : OC / BC / MBC / DC / SC / ST

07. Marital Status : Married / Unmarried

08. Name of Father :

09. a) Name of Spouse :

b) Occupation of Spouse :

10. Languages Known : _____ Read/Write/Speak

_____ Read/Write/Speak

11. Aadhaar ID :
(Copy to be enclosed)

12. PAN No :
(Copy to be enclosed)

13. Qualification

Degree	Course	Name of the University / Institution	Year of Passing	Class Obtained	Scored % / CGPA
U.G					
P.G					
Ph.D.					
Others					

14. Work Experience:

a)

S.No.	Name of the College / Organization	Designation	Period of Service		TOTAL	
			From	To	Yr.	Months
1.						
2.						
3.						
4.						

b) Total Years of Teaching Experience : Experience in this Institute:

c) Total years of Industrial Experience :

d) Total years of Research Experience :

15. a) Date of Award of Ph.D. :

b) Post Ph.D. Experience (in Years) :

In Institutions	In Industries	Research Lab / Others

16. Details of Grants Received :

17. Total no. of Funded Projects Completed :

18. Consultancy Projects Undertaken :

20. Details of Journal Published :

(List may be enclosed)

Description	Scopus Indexed	Web of Science	Others
Total Numbers			

21. Total Number of Recent Publications :

(List may be enclosed)

22. Details of Patents Obtained/Applied :

(List may be enclosed)

Description	Obtained	Applied
Total Numbers		

23. Membership in Professional Societies :

24. Details of Conferences / Symposia / Seminars / Workshops attended in this Academic Year*:

Description	Name of the Seminars / Conferences / Symposia / Workshops	Name of the Sponsoring Agency	Place and Date
Total Number Organized			
Total Number Attended			
Grand Total			

(*List may be enclosed)

25. Contribution to the Department :

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26. Contribution to the Institute :

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27. Details of Awards if any :

28. Extension Work / Community Service :
(Examples: Lions / Rotary Club, etc.)

29. Participation in Corporate Life
a) University / Institution Level :

b) Co-Curricular Activities :

c) Enrichment of Campus Life :

d) Student Welfare & Discipline :

e) Participation in Bodies :

f) Committees on Education :

h) National Development :

30. Teaching Experience

Courses Taught*	Name of the University / College / Institution	Duration
UG Level		
PG Level		

(*List may be enclosed)

31. Results Produced

Subjects Handled*	Pass Percentage Current Year – 1	Pass Percentage Current Year – 2	Pass Percentage Current Year – 3

(*List may be enclosed)

32. Mobile Number :

33. E-mail ID :

34. Permanent Address (with Mobile Number) Local Address (with Mobile Number)

35. Score as per the details provided in **Part II** (API):

Description	Self-Assessment	HoD's Review	DEAN's Review (Respective School)	External Expert Committee's Review
Maximum Score				
Score Obtained				

I _____ hereby, declared that the above information provided are true and correct to the best of my personal knowledge and belief.

Place:

Signature of the Staff with Date

Declaration:

Description	HoD	DEAN (Respective School)	External Expert Committee
Recommendation			
Signature			

(For office use)

Certificates verified by

Signature

Approval of the Competent Authority