Instructions:

**Price Rs.1500/-**

**KARMAVEER BHAURAO PATIL UNIVERSITY, SATARA**

Report of Changes in Teaching Staff

1. This form is to be used for obtaining approval of the University to :
	1. New Appointments
	2. Substitute Appointments
	3. Transfers
	4. Change in Designations
2. Certified copies of the following documents must be attached with this form :-
3. The appointment order of the teacher as per Statute 195-Appendix-A or transfer order.
4. The University letter/s granting approval to the Selection Committee Report/Changes in Staff

Report

1. P. G. Recognition, if any
2. In case of Inter University Transfer.
	1. approval letter of the concerned University
	2. permission letters for transfers of both the Universities
3. If Ph. D. Thesis submitted before 31st, December, 2002, xerox copy of University Receipt must be enclosed.
4. Copy of Declaration/Notification of award of M. Phil./Ph. D. Degree
5. Copy of Caste certificate
6. NET / SET passing certificate.
7. In case of teacher, the form should be signed by the Principal.
8. In case of Principal, the form should be signed by Chairman/Secretary of the Management.
9. Fully qualified candidates selected through University Selection Committee in a clear vacancy must be appointed on Probation.
10. Candidates selected through University Selection Committee in a clear vacancy but who do not have the necessary qualification, i.e. NET/SET or are not exempted from NET/SET will be appointed on Ad-hoc basis.
11. Any changes occurring during a term should be reported within fifteen days from the date of change
12. Incomplete forms will not be considered and the forms will be sent back
13. Name of the College / Institute :
14. Name of the Teacher Appointed

(Beginning with Surname in BLOCK Letters) :

1. Date of Birth :
2. Nature of Appointment : \* Full Time / Part Time / C. H. B. / Honorary
3. Tenure of Appointment : \* Temporary / Adhoc / Probation / Permanent / Honorary (\* Strike out whichever is not applicable)
4. Previous Designation (If any)
5. Whether it is a New Appointment or : Substitute Appointment or an Appointment due to the Transfer or promotion if any.

Present Designation

(2)

1. Date of Appointment in Sanstha :
2. Date of Joining in this College :
3. Letter No. and Date of University letter : granting approval to the Selection

Committee Report : (for new appointments)

1. Letter No. and Date of Approval of the :

University to the appointment (Changes in Staff) if any,

(in transfer cases)

1. Subject/s for which approval has been given :
2. a) Scale of Pay :
3. Present Basic Pay :
4. Allowances :
5. Total emoluments :
6. Previous Pay Scale if appointment is : due to change in Designation
7. Whether opted for Provident Fund / Pension :
8. a. Whether Recognised as a Post-Graduate :

Teacher

(A copy of approval letter to be enclosed)

* 1. Subject in which Post-Graduate :

Recognition is sought

* 1. University Letter No. : Date of Recognition :
	2. By Papers : By Research :
	3. Research Guidance, if any

M. Phil. :

Ph. D. :

(3)

1. Qualifications

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of the Examination | University and Year of Passing | Percentage of Marks | Name of Subjects with no. of Papers Offered | Class Obtained |
| Principal level | Sub-ordinate level |
| 1. Degree |  |  |  |  |  |
| 2. Post-Graduate |  |  |  |  |  |
| 3. SET/NET or any other equivalent |  |  |  |  |  |
| 4. M. Phil. / Ph. D. Degree : Title of the Thesis : |  |  |  |  |  |
| 5. \* Teaching Qualifications\*\* or Professional Qualifications |  |  |  |  |  |
| 6. Any Other Qualification |  |  |  |  |  |

\* In case of Teachers in the Faculty of Education

\*\* In case of Teachers in the Faculty of Engineering / Law / Commerce

|  |  |  |
| --- | --- | --- |
| †17. 1. | Professional Experience : | Years : |
| 2. | Member of Professional Institutes, and type of Membership If any | :: |
| 3. | Administrative Experience | : Years : |
| 4. | Professional Experience Standing at Bar | : |

(In case of Law Teacher)

(† In the Case of Teachers in the Faculty of Engineering / Law / Commerce)

# I here by declare that the Information given as Sr. No. 1 to 17 is Correct as per recored

Principal/Director In case of Teader

Chairman/ Secrtary

In Case if Principal/ Directore

(4)

1. Teaching experience
	1. As Lecturer / Principal

|  |  |  |
| --- | --- | --- |
| Name of the College / Institute | Name of the University to which the College / Institute is affiliated | Experience |
| Degree teaching | Post-graduate teaching |
| Subject | From | To | Subject | From | To |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

* 1. Total teaching experience under (a) above :

Teacher’s Permanent Address :

Shri / Smt.

Date :

I hereby declare that the information given as Sr. No. 16 to 18 is correct.as, per record

Principal/Director Chairman/Secretary Signature of Teacher (in case of teachers) (in case of Principal/Director)

(5)

1. Teaching work assigned :-

|  |  |  |  |
| --- | --- | --- | --- |
| Classes | Subjects | Periods per week | Total |
| Lecturers | Practical Periods | Others |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. A. In case of Part time teacher appropriate details regarding his/her teaching work in other colleges if any, must be given in the following format.

|  |  |  |  |
| --- | --- | --- | --- |
| College | Classes | Subjects | Periods per week |
|  |  |  |  |

(6)

1. Details regarding Vacancy filled up :
	1. Whether New Vacancy, if so, : Sanction letter No. :

Date :

* 1. Name of the Member who Left : (If the vacancy is created due to transfer)
	2. Designation :
	3. Date of Leaving :
	4. Reason for Leaving :
	5. Subject and Classes taught :
	6. University approval letter No. :

Certified that I have verified personally the information given above in the form and it is true and correct. as per Record

Date :

Place :

Principal / Chairman College / Management

(S. U. Press : 526/3,000/D-3/3-2005)

**KARMAVEER BHAURAO PATIL UNIVERSITY, SATARA**

# Chart Showing the Details of the Teacher’s approval of Changes in Staff/Change of Designation

(To be filled by the college/institutions) File No. :

Name of the College : (For Uty Office use only)

Name of the Teacher : Designation

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sr.No. | Subject | QualificationsP. G. Degree Percent- age | Year of Passing | Date of Appointment/ Transfer | Teaching periods per week | Nature of Appointment Full time/ Part time/C. H. B./ Honorary | Tenure of Appointment Temporary/ Adhoc/ Probation/ Permanent/ Honorary | Experience | Basic Pay | Remarks(For UTYOffice Use only) |
| Teaching | Profes- sional |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|  |  |  |  |  |  |  |  |  |  |  |  |

# Principal / Director (Signature & Seal)