

**Bishop Chulaparambil Memorial College
(B.C.M. College)
Kottayam -686 001**

www.bcmcollege.ac.in

Affiliated to Mahatma Gandhi University, Kottayam

Managed by ArchEparchy of Kottayam

Application for the Post of Guest Lecturer

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Subject:

1.	Name of the Candidate in Block letters [as in SSLC]							
2.	Sex [Put tick ✓ against the appropriate one]	Male		Female		Third Gender		
3.	Date of Birth	D	D	M	M	Y	Y	
4.	Age as on 1 st January, 2021			Years			Months	
5.	Category of Applicant [Put tick ✓ against the appropriate one]	SC		ST		OBC		
		OEC		Knanaya		General		
6.	Religion							
7.	Community							
8.	If Knanaya Catholic, please specify Parish							
9.	Permanent Address with PIN							
10.	Contact Address with PIN							
11.	EMAIL							
12.	Mobile Number							
13.	Alternate Contact number							
14.	Whatsapp Number							

15. Educational Qualification

Qualification	Institution	Board/University	Subject(s)	Year of Passing	No. of Attempts	Class	CGPA/% of Marks
SSLC/10th							
HSEor Equivalent							
Degree							
PG							
M Phil							
Others							

16. Details of Qualifying National Eligibility Test

i. Have you Qualified for Lectureship in the National Eligibility Test conducted by UGC-CSIR	Yes		No	
ii. If Yes, Month and Year of exam				
iii. Qualified for JRF				

17. Details of PhD

i. Have you qualified for PhD	Yes		No	
ii. If Yes, Month and Year of awarding				
iii. University and faculty				
iv. Title of the thesis				
v. Date of PhD Registration				
iv. Is your PhD according to UGC regulations 2011	Yes		No	

18. Details of Experience

19. Total Teaching Experience in Colleges/Universities :----- Years ----- Months

20. Total Research Experience excluding period spend for Mphil & PhD :----- Years

----- Months

21. Details of ICT Enabled Teaching

22. Details of Publications (Attach separate sheet if needed)

Undertaking

I hereby declare that the information provided above is true to the best of my knowledge and belief. I also understand that any discrepancy or misleading information will result in the rejection of my application.

I undertake that in the event of any information being found false, incomplete or incorrect, I will solely be responsible and my candidature is liable to be cancelled and my appointment can be terminated.

Also I hereby undertake to abide by the rules and regulations of UGC/Government/ University and the College and follow the Code of Ethics of the college.

Place:

Signature of the applicant

Date: