



திருவள்ளூர் பல்கலைக்கழகம்
THIRUVALLUVAR UNIVERSITY
SERKKADU, VELLORE – 632 115

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Application for the Post of: DIRECTOR OF PHYSICAL EDUCATION

Advertisement No. _____

1. Name in full (in BLOCK LETTERS) :
2. Father's / Mother's / Husband's Name :
3. Date of Birth and Age :
(Supported by Certificate evidence)
4. Sex : Male / Female
5. Place of Birth and Nativity :
(District and State)
6. Nationality / Religion / Caste :
7. Community to which the candidate belongs (Attested copy of the latest community certificate to be enclosed) : OC / BC / BC(M) / MBC / DNC / SC(A) / SC / ST
8. Present Address (to which communications should be sent) :
9. Mobile Number(s) :
e-mail id :
10. Mother Tongue :
11. Vernacular Language in School/College :
If Differently abled, give details :
(Enclose an attested copy of the certificate)
12. Occupation :

13. Designation, Scale of Pay in the Present Post & Basic Pay drawn as on date of the application *(Proof to be attached)*

- (a) Designation :
 (b) Scale of Pay :
 (c) Basic Pay :

14.(a) Educational Qualifications (University Education)

| S.No. | Institutions studied | Years of Study | Part/full time | Degree or Diploma | Whether passed in one appearance | Class of grade/ % of Marks | Specialization |
|-------|----------------------|----------------|----------------|-------------------|----------------------------------|----------------------------|----------------|
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(Attach self attested copies of Certificates / Mark sheets in support of each degree or diploma)

(b) Details of Ph.D. Degree:

1. Date of Submission of Ph.D. Thesis :
 2. Month and Year of Ph.D. Degree awarded :
 3. Subject and Title of the Thesis :

(c) Post Doctoral Work if any :
(Any other higher degree like D. Sc., D. Litt., etc)

(d) Details of SLET / SET / NET passed, conducted by UGC CSIR Similar Tests Accredited by the UGC

| Name of the Eligibility Test | Subject | Month & Year of Passing |
|------------------------------|---------|-------------------------|
| | | |

15. Experience regarding previous and present employment

(Authenticated experience Certificated to be attached separately)*

| S.No. | Employer | Post held | Pay drawn | Period of employment | | | | |
|-------|----------|-----------|-----------|----------------------|----|------|--------|------|
| | | | | From | To | Year | Months | Days |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | Total | | | | | |

*Period spent on study for Master's / Ph.D. degrees should be included except the part time study period (Attach a separate sheet, if space is not sufficient)

16. Teaching, Research and Administrative Experience

A. Teaching*

| S.No. | Classes | College/University in which taught | Duration | | | | |
|-------|---------|------------------------------------|----------|----|---|---|---|
| | | | From | To | Y | M | D |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |
| 6. | | | | | | | |

*The period of teaching experience gained simultaneously for Under Graduate & Post Graduate courses should be shown under Post Graduate only.

B. Research Experience **

| Subject | Place of Work | Duration | | | | | Number of Students guided and degree awarded only | |
|---------|---------------|----------|----|---|---|---|---|-------|
| | | From | To | Y | M | D | M.Phil. | Ph.D. |
| | | | | | | | | |
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| | | | | | | | | |

** The Period spent on study for M.Phil. / Ph.D. degree should not be included except the Part-time study period.

C. Administrative Experience

| S. No | Position held | Name of the Institutions | Duration | | Year of Experience |
|-------|---------------|--------------------------|----------|----|--------------------|
| | | | From | To | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |

D. List out Coaching Campus and Competition organized *(Proof to be attached)*

E. Provide track records athletes produced at state level, national, inter-university etc.
(Proof to be attached)

F. Whether you are eligible as per Physical Fitness norms prescribed in the qualification
(Proof to be attached)

17. Experience gained for the post applied (*proof to be attached*):

| S. No | Position held | Name of the Institution | Experience | | |
|-------|---------------|-------------------------|------------|--------|------|
| | | | Years | Months | Days |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |

18. Research Projects / Scheme completed / Undertaken at present. Give the title, sponsor & duration and cost of the project. (*Attach separate sheet, if necessary*)

| Title of Major Research Project | Funding Agency (National / International) | Sponsor | Duration of the Project | Total cost of the Project | Completed / Undertaken |
|---------------------------------|---|---------|-------------------------|---------------------------|------------------------|
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19. Trainings undergone (Academic / Administrative) (*Attach separate sheet if necessary*)

| S.No. | Name | Place | Period | Sponsor | Field of Specialization | Expertise Developed or learnt | Application of Training |
|-------|------|-------|--------|---------|-------------------------|-------------------------------|-------------------------|
| i. | | | | | | | |
| ii. | | | | | | | |
| iii. | | | | | | | |
| iv. | | | | | | | |

20. Other Academic Service

| S.No | Name of Service | Institution / University | Duration | | Total year of experience |
|------|--|--------------------------|----------|----|--------------------------|
| | | | From | To | |
| 1 | Chairman / Member Board of Studies | | | | |
| 2. | Chairman / Member Question Paper Setting Board | | | | |
| 3. | Chairman / Member Selection Committee | | | | |
| 4 | Chairman / Member Experts Committee | | | | |
| 5 | Member Academic Council | | | | |
| 6 | Senate Member | | | | |
| 7 | Syndicate Member | | | | |

21. Other Experiences

| S.No | Position Held | Institution / University | Duration | | Total year of experience |
|------|-------------------------------------|--------------------------|----------|----|--------------------------|
| | | | From | To | |
| 1 | NSS Officer / Co-ordinator | | | | |
| 2. | NCC Officer | | | | |
| 3. | Co-ordinator-CDC | | | | |
| 4 | Member of Govt. Bodies / Intuitions | | | | |
| 5 | Dean / Director | | | | |
| 6 | Deputations to Overseas etc., | | | | |

22. Fellowship / Award or Prize / Distinction received (if any)

| S.No | Name | Institution | National / International | Purpose of Award | Year |
|------|------|-------------|--------------------------|------------------|------|
| | | | | | |
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23. Membership in Professional Bodies (*Proof to be attached*)

| S. No | Organization | Position | Duration |
|-------|--------------|----------|----------|
| i. | | | |
| ii. | | | |
| iii. | | | |
| iv. | | | |

24. Publications:a) **Books** (*Proof to be attached*)

| S. No | Title of the Book | Authored / edited | Publisher | ISSN / ISBN |
|-------|-------------------|-------------------|-----------|-------------|
| | | | | |
| | | | | |
| | | | | |

b) **Books Chapter** (*Proof to be attached*)

| S. No | Title of the Book | Book Title | Publisher | ISSN / ISBN |
|-------|-------------------|------------|-----------|-------------|
| | | | | |
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25. Research Papers (*Original articles*) :a) **National Journals**

| Author's Name | Title | Year of Publication | Publisher's Name | Volume & Page number | Impact Factor | Sl.No. of UGC care /Scopus/WoS indexed |
|---------------|-------|---------------------|------------------|----------------------|---------------|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |

(* **Proof to be attached**)

b) International Journals

| Author's Name | Title | Year of Publication | Publisher's Name | Volume & Page number | Impact Factor | Sl.No. of UGC care /Scopus/WoS indexed |
|---------------|-------|---------------------|------------------|----------------------|---------------|--|
| | | | | | | |
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| | | | | | | |

(* Proof to be attached)

c) Papers in Conference Proceedings:

| S. No | Author(s) | Title of the Article | Name of the Conference Proceedings details | Vol. Issue & Page No. | Year of Publication | ISSN / ISBN No (if any) |
|-------|-----------|----------------------|--|-----------------------|---------------------|-------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

(* Proof to be attached)

26.

(a) Papers presented in National / International Seminars, Symposia, Conferences and Workshops (* Proof to be attached)

(b) List of Invited Lectures / Resource persons details (* Proof to be attached)

(c) National/ International Seminars, Symposia, Conferences and Workshops Organized (* Proof to be attached)

27.

(a) Details of Industrial Consultancy, if any : (Proof to be attached)

(b) Details of Patents, if any : (Proof to be attached)

(c) Policy document (International body / UNO / UNESCO/etc./ Central Government / State Government details (Proof to be attached)

28. Disciplinary Actions (if any) :

| S.No. | Type of action | Nature of Punishment |
|-------|----------------|----------------------|
| | | |
| | | |

29. Languages known :

| S.No. | Name of the Language | Read | Write | Speak |
|-------|----------------------|------|-------|-------|
| | | | | |
| | | | | |
| | | | | |

30. Other Skills :

| S.No. | Type of Skills | Nature of Proficiency |
|-------|----------------|-----------------------|
| | | |
| | | |

31. If appointed, time required to join duty:

32. List of Testimonials: Name, address, Email and mobile number of two persons from whom you have enclosed your testimonials (One of which should be from the Employer / Head under whom the applicant serving / last served / studied)

- 1.
- 2.

33. Name and address Email and mobile number of two responsible persons (not relatives) to whom reference regarding the applicants work and conduct can be vouched.

- 1.
- 2.

34. Abstract of outstanding contributions, if any (in one page only) to be submitted to the Vice Chancellor directly.
35. Please provide a write-up of what you would achieve if you are selected for the position you have applied (not exceeding 200 words)
36. Any other information regarding experience, etc. in support of satisfying the rules prescribed for the post now applied for.

DECLARATION BY THE APPLICANT

I certify that the information furnished above are true and correct to the best of my knowledge and belief. Should there be any incorrect or false information having been furnished or that may come to light in due course, I bind myself for such action as the University may decide.

Signature:

Name & designation:

Place:

Date:

List of Enclosures:

(1)

(2)

(3)

(4)

(5)

(6)

RECOMMENDATION OF THE HEAD OF THE DEPARTMENT / OFFICE

The particulars furnished were verified with Service Register and found correct.

Head of the Department / Office

Note:

While sending the application, the Head of Office is requested to send the confidential report of the candidate separately on the same day in a separate cover, superscribed as **"FOR SELECTION TO THE POST OF DIRECTOR OF PHYSICAL EDUCATION, THIRUVALLUVAR UNIVERSITY, VELLORE"**.

THIRUVALLUVAR UNIVERSITY

SERKKADU, VELLORE-632 115

GENERAL TERMS AND CONDITIONS OF APPOINTMENT AND OTHER INSTRUCTIONS TO CANDIDATES

1. **Scale of Pay:** As per G.O.Ms.No.5, Higher Education (H1) Department, dated 11.01.2021
2. Qualifications and other conditions prescribed and notified by the MHRD/UGC Norms.
3. Candidates must be Indian National.
4. Candidates who are abroad may apply on plain paper giving full particulars together with an International Money Order to cover the Registration fee of \$.100/-
5. Candidates who satisfy the conditions prescribed to the satisfaction of the University authorities should be prepared to appear before the University Staff Selection Committee for interview at their own cost.
6. Candidates may be called for an interview as per the list prepared by the Screening Committee appointed for the purpose and approved by the Vice-Chancellor. The summoning of the candidate for interview does not mean that he/she is recommended or selected for the post.
7. The University reserves the right to accept or reject any application. Further the University reserves the right to fill or not to fill up the post without assigning any reason whatsoever.
8. Any attempt by the candidate, either directly or indirectly to influence the Selection Committee or other authorities of the University will disqualify the candidate for the post.

9. The service conditions and other terms of appointment in the University shall be subject to the approval of the Syndicate of the Thiruvalluvar University.
10. Selection of candidates already in employment will be subject to the employer's agreement to relieve them.
11. Video Conferencing will be arranged for foreign candidates for interview on payment of the cost by the candidates.

INSTRUCTIONS:

1. The application form shall be filled completely in all respects, giving correct information. Defective and incomplete applications and those with wrong or false information will be rejected.
2. The application form, together with a **Crossed Demand Draft for Rs.500/- towards Application fee and Rs.100/- towards Registration fee** drawn **in favour of the Registrar, Thiruvalluvar University payable at Vellore**, should be sent to **the Registrar, Thiruvalluvar University, Vellore-632 115** on or before the prescribed time and date. SC/ST and differently abled candidates are exempted from paying application fee, however, they have to pay Registration Fee of Rs.100/-
3. Persons who are already working in State or Central Government or any other organization should send their applications through proper channel. Any delay in sending the applications through proper channel is not the responsibility of the University. Advance copies of the applications reaching **the Registrar, Thiruvalluvar University, Vellore - 632 115**, within the prescribed time limit shall be entertained provided the original application forwarded through proper channel reaches the Registrar before the candidates are called for interview of the Screening Committee needs.
4. Candidates may send copies of testimonials from persons well acquainted with his / her works and character and must also give name and address of three persons in India to whom references can be made. If he / she has been in employment he / she should either give his / her present of most recent employer or immediate superior, as a referee or submit a recent testimonial from him / her. He / She should also submit an attested copy of the entry relating to his / her

date of birth, from the Matriculation or Secondary School Leaving Certificate, attested copies of his/her Degree certificate or / and Diploma testimonials.

5. If a candidate desires to name as a referee any person residing outside India, he / she should write to that person asking him to send a statement of his opinion concerning the candidate's character and suitability for the post directly to the Vice-Chancellor, Thiruvalluvar University, Vellore - 632 115. The reply will be treated as confidential.
6. Evidence of Degree/Diploma certificate and testimonials should be brought in original at the time of interview.
7. Separate application with separate Registration fee is required for each post.
8. Applications from candidates who are in service will be considered only if forwarded through proper channel. In such cases, advance copies (7 numbers) of application should to **the Registrar, Thiruvalluvar University, Serkkadu, Vellore - 632 115 on or before 5.00 P.M. of 03.04.2023.**
9. Application received after the last date will summarily rejected
10. Knowledge of Tamil to the extent of carrying official correspondence and drafting reports is essential.
11. The photo affixed in the application is to be self attested.
12. Original copy of No objection certificate (NOC) should be submitted at the time of interview.

REGISTRAR