



Shri Aillak Pannalal Digambar Jain Pathashalas
(Jain Religious Minority Institute)

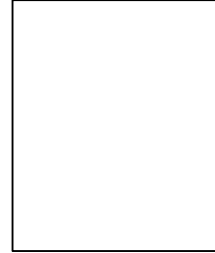
Kasturbai College of Education, Solapur

Seth Walchand Hirachand Marg, Ashok Chowk, Solapur 413006 (Maharashtra State)

APPLICATION FORM

(Candidate must fill this form in his/her own Handwriting)

To
The Principal
Kasturbai College of Education,
Solapur



Sub: Application for the post of **Assistant Professor in**_____.

Respected Sir,

As per the advertisement published in Daily Newspaper _____, Dated _____,

I, the undersigned, am applying for the Post of **Assistant Professor in**_____at
colleges of your renowned institution.

A) Applicant's Personal Information:

1) Full Name (Surname First) : _____

Full Name in Devnagari : _____

2) Correspondence Address : _____

: _____

: _____

3) Permanent Address : _____

: _____

: _____

4) Mobile No. : _____ E_mail. _____

5) Date of Birth : _____ Age: _____ Years _____ Months

(As on date of Application)

6) Religion and Caste : _____ Category: _____

(SC, ST, VJA, NT, OBC, SBC, OPEN, JAIN)

7) Whether Physically Handicapped: Yes / No

(Enclose Photo copies of caste certificate, caste Validity, Non-Creamy Layer certificate, physically handicapped certificate whichever is applicable along with the application)

B) Educational Qualification:

Sr. No.	Examination	Subject	Year of Passing	Marks Obtained	Total out of Marks	Percentage / CGPA	Class	Board/ University
1	S.S.C							
2	H.S.C.							
3	B.A./B.Com./B.Sc.							
4	M.A./M.Com./M.Sc.							
5	NET							
6	SET							
7	M. Phil							
8	Ph.D.							
9	Any other							

(Self-attested copies the documents should be attached)

C) Experience:

Sr. No.	Name of Institution	Designation	Nature of Appointment	Period of Appointment	
				From	To

D) Are you the past student of this Education Trust?**YES / NO**

If Yes, Branch Name _____

I, certify that, all the information given by me is true to the best of my knowledge. If wrong, then my candidature may be automatically terminated.

Therefore, I am requesting you to consider my application favorably and oblige. Thanking you,

Yours faithfully

Date:**Place:**

Signature

(Name: _____)

(Note: Applications with incomplete information will not be considered.)

Kasturbai College of Education, Solapur

Table 3 B Score for the Post of Assistant Professor in the Colleges as per the GR dated 31.08.2026

Name of the Candidate _____ Subject: _____

Sr. No.	Academic Records	Score	Self-Appraisal Score	Verified Score
1	Graduation	80% & Above = 21		
		60% to less than 80% = 19		
		55% to less than 60% = 16		
		45% to less than 55% = 10		
2	Post- Graduation	80% & Above = 25		
		60% to less than 80% = 23		
		55% (50% in case of SC/ST/OBC (non-creamy layer) /PWD) to less than 60% = 20		
3	M. Phil.	60% and above = 07		
		55% to less than 60% = 05		
4	Ph.D.	= 25		
	M.Phil. + Ph.D. Maximum - 25 Marks			
5	NET with JRF	= 10		
	NET	= 08		
	SET	= 05		
	JRF/NET/SET Maximum - 10 Marks			
6	Research Publications (2 marks for each research publications published in Peer-Reviewed or UGC-listed Journals) (Max. Marks 06)			
7	Teaching Experience (Max. Marks 10) Teaching / Post-Doctoral Experience (2 Marks for one Year) If the period of teaching/post-doctoral experience is less than one year then the marks shall be reduced proportionately.			
8	Awards – Maximum 03 Marks			
	International / National Level (Awards given by International Organizations/ Government of India / Government of India recognized National Level Bodies) = 03			
	State-Level Awards given by State Government = 02			
	Total = 100			

Date:

Place:

Signature of the Candidate

(Name: _____)

Note:

(A)

- (i) M.Phil. + Ph.D. Maximum - 25 Marks
- (ii) JRF/NET/SET Maximum - 10 Marks
- (iii) In awards category Maximum - 03 Marks

(B) Number of candidates to be called for interview shall be decided by the college.

- (C) Academic Score - 84
- Research Publications - 06
- Teaching Experience - 10
- TOTAL - 100

(D) SLET/SET score shall be valid for appointment in respective State Universities/Colleges/institutions only.

Declaration Form

'A' (See Rule-04)

Shri./Smt./Dr. _____ Son/ Daughter/ Husband/Wife of

Shri. _____ aged _____ years, resident at _____ do hereby
declare as follows:

1. That I have filled my application for the post of _____
2. I have _____ (Number) living children as on today, out of which no. of children born after 28th March 2005 is ____ (Mention dates of Birth, if any).
3. I am aware that if any total number of living children are more than two due to the Children Born after 28th March 2005, I am liable to be disqualified for the same post.

Date:

Place:

Signature of the Applicant

Office Use Only

The credentials are verified and the candidate is **Eligible / Not Eligible**

Reason for Not Eligible Candidate:

Name & Signature
Member
Scrutiny Committee

Name & Signature
Member
Scrutiny Committee

Name & Signature
Chairmen
Scrutiny Committee