

GC WOMEN UNIVERSITY SIALKOT

Sialkot, Pakistan (www.gcwus.edu.pk)

APPLICATION FOR FACULTY POSITION BS/TTS

(To be filled by the Applicant, for Lecturer (BS), Assistant Professor, Associate Professor, Professor)

Position applied for			
Department:		Photograph	
Subject/Area of Specialization		(Passport size)	
Consolidated Advertisement No.			
Postal Order No./ Bank Draft No./:	Amount(Rs.):		
1. Name (in block letters):			
2. Father Name:			
3. Address:			
i) For Correspondence:			
ii) Permanent Address:			
ii) Termanent Address.			
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iii) E-mail: iv) Telephone (Re			
4. Date of birth:// (DD/MM/YY) i)	(On closing date of Advertiser		
5. Nationality:	6. National ID/Passport Nu		
7. Gender	8. Religion		
9. Current Position:			
10. My PhD thesis was evaluated by (Name, Institution	and Place)*:		
i) Name: Institution:		Country:	
ii) Name: Institution:		Country:	
iii) Name: Institution:		Country:	
11. Declaration:			
All the entries/information provided by me for appointment		correct. If any document is found fake	
or having incorrect information, the appointment made wil	l be treated as cancelled.		
Date:/2021 Name of App	licente	Signature:	
* This information must be provided only by those who are a		_	
FOR OFFICE USE ONLY (To be filled by the respecti	ve University Officials)		
Position recommended by the authority:			
Subject/Area of Specialization:	Qualification:		
Declaration:			
This is to certify that all the entries and information provided by the applicant are duly checked by the undersigned against their			
original documentary evidence and found correct/true. Checked By: Designation:	Signature with O	fficial Stamp	
Designation.	Signature with Of		

i) Details of Academic Record (Start with the highest degree)

Sr. No	Degree/ Certificate	CGPA/ Division	Passing Year	Institution/Board	Subjects	Distinction/Position (if any)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

ii)	Detail of PhD: Name of the University:	
	Thesis Title:	
	Main Field:	Sub Field:
	Date of Completion:	Date of Issuance of Degree:
	D 4 11 CC 1 D 1 (G) 1 14	

b) Details of Service Record (Start with recent position. Only mention those having duration of at least three months)

	i) Post Ph.D. Teaching/ Research/Professions	al Experience		
Sr	Institution	Position Held	Per	riod
No.	Histitution	r osmon field	From	To
1				
2				
3				
4				

	ii) Pre Ph.D. Teaching/ Research /Profession	nal Experience		
Sr	Institution	Position Held	Per	iod
No.	institution	Position Heid	From	To
1				
2				
3				
4				

•	Post PhD Experience (Years)	(Months)	& Days:	
•	Pre PhD Experience (Years)	(Months)	& Days:	
•	Total Experience (Years)	(Months)	& Days:	

- c) Research Productivity:
- i) Details of Research Supervision

	Research Supervision			esearch Record	
Degree	Thesis Supervised/ Completed	In Progress		Total	Last 5 years
Ph.D.			Publications		
MS/ M.Phil.			Projects		
M.Sc.			Book	s/ Chapters in Boo	k
B.Sc. (Hons)			i. National		
			ii. International		

ii) List of Publications in Journals Having IF (Impact Factor)* (To be filled by the Applicant)

S.No	Name of Author/s	Title of the Article	Name of the Journal	Vol. No. & Pages	Year Publishe d	Impact Factor
(Dlagge (attach separate list, if, rec	unicad)				

(Please attach separate list, if, required)

^{*} Impact Factor (IF) of a particular Journal can be checked from the http://www.isiwebofknowledge.com

List of Publications in Journals Having NO IF (Impact Factor) in HEC Recognized Journals*. iii) (To be filled by the Applicant)

S.No	Name of Author/s	Title of the Article	Name of Journal	Vol. No & pages.	Years of Publication	HEC Category
(Please	attach separate list, if, red	mired)				

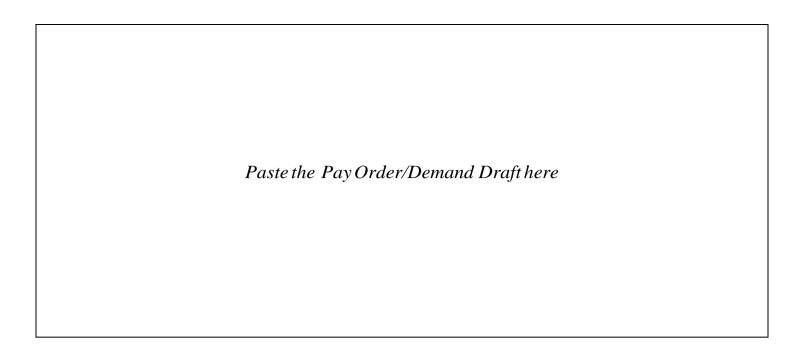
d) Any Other Information:

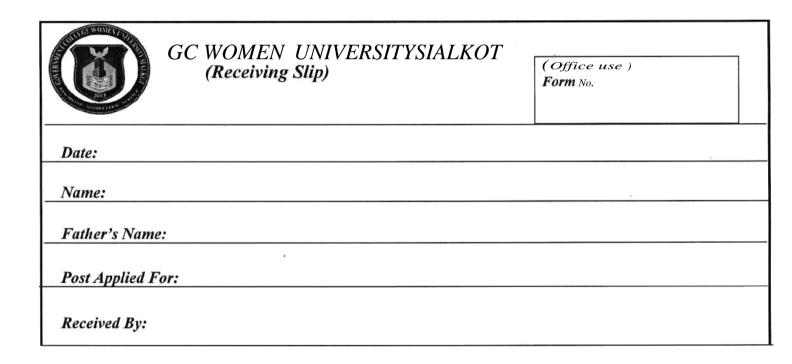
The applicant may furnish additional information not c	overed in this form
e) References: (Please Provide information of two a	cademic/ professional referees)
Referee No. 1: Name:	
Designation:	Organization :
Address:	
Contact No.:	Email:
Referee No. 2: Name:	
Designation:	Organization :
Address:	
Contact No.:	Email:

^{*} Journals recognized by the Higher Education Commission (HEC), Pakistan for the purpose of BS/TTS appointments other than Natural Sciences and Computer Science. For detail you may visit "HEC Recognized Journals" on the website of the HEC: http://www.hec.gov.pk

	Certificate &D.M.C. of Matric/O-Level			
	Certificate &D.M.C. of Intermediate (F.A./I.Com./F.Sc./A Le	vel/other		_)
C (i	Degree &D.M.C. of Graduation (B.A./B.Com./B.Sc./B.Sc.(Hoff degree of B.Sc. (4/5 Years Program) not attached then Notification of Result should be provided along with Engree and attached then Notification of Result should be provided along with Engree of the Notification of Result should be provided along with Englishment (B.A./B.Com./B.Sc.)	ons.)/other_ ould be provided :/M.Sc.(Hot	d along wi	_) th D.M.C.)
N	Notification/Degree of Ph. D.			
N	No. of Experience Certificates			
II o	Departmental Permission Certificate from appointing authority in case the candidate has been terminated from any Government of a vacancy, Certificate of such service. In case of Ex-Serviceman, Discharge Certificate		_	
C	Copy of Domicile			
C	Copy of National Identity Card			
Т	Three Recent Photographs (passport size)			
В	Bank Draft			
	ies/information provided by me for appointment under BS/TTS is verifieding incorrect information, the appointment made will be treated as cancell	ed.	·	
Date:/_	/2021 Name of Applicant:Sig	nature:		
FOR OFFICE	E USE ONLY (To be filled by the respective University Officials)			
		Date:	/	/2021
Position recom	mended by the authority:			
Subject/Area of	f Specialization:Qualification:			
Number of Pub	olications s/he has got with Impact Factor:			
	of Publications s/he has got (in HEC recognized Journals*):			
Number of rece	ent (in the last five years) Publications (in HEC recognized Journals*):			
	Ty that all the entries and information provided by the applicant are duly contentary evidences and found correct/true.	hecked by the	undersig	ned against their
_	Designation: Signature with		_	
1				

f) Tick against the certificates and other documents which you have Attached with this application:





Address for Correspondence To be filled by the Candidate (Compulsory)

Name	S/D/O	
Postal Address:		
Contact No.		
Email Address:		
	S/D/O	
Contact No		
Email Address:		
	S/D/O	
Postal Address:		
Contact No.		
Email Address:		
Name	S/D/O	
Postal Address:		
Contact No.		
Email Address:		