

Devi Ahilya Vishwavidyalaya, Indore
College Development Council
 (Photocopying be done for multiple copies)

The Council is updating the information of Experts to be involved in College Affiliation, Seat Increase, Renewal, Physical Verification and Selection Committee. The form below is to be filled with correct information by regular teachers/subject experts who fall under the following categories:

Category-I: Professors/ Readers/ (Lecturers with Min 6 Years Experience) of a UTD of DAVV, Indore.

Category-II: Principals/ Professors/ (Assistant Professor with Min 8 Years Experience) Govt. / Govt. Grant-in-Aid Institutes/ Colleges affiliated to DAVV, Indore.

Category-III: Principals/ Professors/ (Assistant Professor with Min 8 Years Experience) of Institutes/ Colleges permanently affiliated to DAVV, Indore.

Category-IV: Experts from other Universities/ Institutions or Retired Professors as suggested by UTD Heads/ Govt. Institute/ College Principals.

Tick the category above, you belong to

(A) PERSONAL INFORMATION:

1. Name: _____
2. Designation: _____
3. Affiliation (College/UTD): _____
 Category-I/II/III/IV(As above): _____
4. Department (Subject): _____
5. Office Address: _____

6. Residential Address: _____

7. Email-id: _____
8. Telephone Nos.: _____
9. Mobile Nos.: _____

(B) ACADEMIC INFORMATION

1. Educational Qualifications: UG: _____ PG: _____ Doctoral: _____
 Post Doctoral: _____ No. of PhDs. Guided _____
2. Faculty (at DAVV) belonging to: _____
3. Subject (in the Faculty): _____
4. Subjects Teaching/taught: _____

5. Areas of Research Interest: _____
6. Nos. of Publications:

	International	National
Journal	_____	_____
Conference	_____	_____
Books	_____	_____

7. Whether held the office of Dean? _____
8. Chairman/ Member of BOS? _____
9. Member of Acad Council, DAVV? _____
10. Total Experience (In years) _____
11. Any other achievement : _____

(C) CONSENT NOTE:

1. I here by consent to perform as an expert member in inspection/ selection committee (wherever I qualify) for the following programmes/ subjects (e.g. BSc/MSc/ MBA/ PhD and related subject):

UG: _____ Subject _____
 _____ Subject _____

PG: _____ Subject _____
 _____ Subject _____

Doctoral: _____ Subject _____

2. I shall be interested in visiting Colleges/ Institutes:

(1) That are LOCAL only (YES / NO): (2) Within 100 Kms (YES/ NO):

(3) Beyond 100 Kms (YES/ NO):

(D) DECLARATION:

1. I shall abide by the all rules and regulations of DAVV, Indore related to affiliation, inspection and selection committee.
2. I shall accept the assignment and complete the same on time under normal circumstances.
3. I shall accept the exam and evaluation related work assigned by DAVV, Indore and complete on time.
4. If I have any personal, social or family affiliation with the management/ trust of the college for which the duty as expert is assigned to me by DAVV, I shall inform to DAVV immediately.
5. I understand that submission of the form does not bind DAVV to appoint me as expert.
6. I declare that all above information furnished by me is true & correct.

Signature with date: _____

Full Name: _____

Verified and Forwarded by
 Head of the Institute

Signature and Seal of UTD Head/ Principal