



**UGC-HUMAN RESOURCE DEVELOPMENT CENTRE
UNIVERSITY OF JAMMU, JAMMU-180006**

(Phone: 0191-2435220

Email:ugcasejammu@gmail.com)

Affix Pp
duly
attested by
Principal/
HOD

**APPLICATION FOR ORIENTATION / REFRESHER / SHORT TERM
FACULTY DEVELOPMENT PROGRAMMES/WORKSHOPS**

Application for Course.....
Bank Draft No.....Date.....Amount.....Name of the Bank.....

A. PERSONAL INFORMATION

Name of Applicant	
Date of Birth	
Gender(Tick)	Male /Female /Transgender
Qualification(Tick)	Masters Degree /M.Phil /Ph.D
Category(Tick)	General /SC /ST /OBC /Others
Address(For Correspondence)	
Email and Mobile No.(Compulsory)	

B. DETAILS OF EMPLOYMENT

Present Designation and Pay Scale/Fellowship	
Department/College/School/Block	
Present Place of Posting/Work and Discipline/Subject/Specialization	
Complete Address of Employer/Principal/HOD/Registrar with Contact Number (including State)	
Affiliation of College/Department with University	
Date of First Appointment in College/University(Contractual),if applicable	
Date of First Appointment in College/University(Permanent),if applicable	
Total Teaching/Research experience at UG/PG levels	
If M.Phil/Ph.D Scholar, then date of Enrollment	

**C. DETAILS OF PREVIOUS EXPERIENCE IN ATTENDING
ORIENTATION/REFRESHER COURSE/PROGRAMME
(if applicable)**

A.	Orientation Programmes Attended	Dates of Course	Organizer/HRDC
(i)			
(ii)			
(iii)			
(iv)			
B.	Refresher Courses Attended(Including Interdisciplinary)	Dates of Course	Organizer/HRDC
(i)			
(ii)			
(iii)			
C.	Any Other FDP(Write details below)		
(i)			
(ii)			
(iii)			

I hereby undertake to participate in the course and do the assignment/assessment work during the course under the guidance of Resource Persons/HRDC and abide by the rules and regulations of University/UGC-HRDC and certify that all information given above is true and to best of my knowledge.

Date.

Signature of the Applicant

CERTIFICATE OF RECOMMENDATION FROM THE HEAD/PRINCIPAL/REGISTRAR

- 1) I recommend Dr./Mrs./Ms/Mr-----
for participation in the -----course.
He /She will be relieved in time to participate in the above mentioned course at Human Resource Development Centre, University of Jammu, if selected;
- 2) Certified that this College/Department/School/Unit is affiliated to -----
University /Autonomus/Deemed University, and is recognized under section 12 (F) of the UGC Act.
- 3) Certified that the particulars given above are true and correct and nothing has been concealed there to .

Date -----

**Signature of the Head/Principal/Registrar
Office Seal**

For Office	
Allowed	Not Allowed

Comments:

S.O.

Director