



UGC – HUMAN RESOURCE DEVELOPMENT CENTRE
SANT GADGE BABA AMRAVATI UNIVERSITY,
AMRAVATI (M.S.)

Phone: 0091-721-2551174, Ext. – 306(Off.)
Fax : 0091-721- 2551174, 2660949

Email : asc.sgbau@rediffmail.com
: um7212551174@bsnl.in
Website: www.ascsgbau.ac.in

APPLICATION FORM FOR ORIENTATION / REFRESHER / SHORT TERM COURSES

(i) **Please read the guidelines carefully before filling the Form.**

(ii) **Incomplete Application will not be entertained**

(Please tick ✓ the appropriate box for the course you are applying)

O.P / R.C / S.T.C

Name of Course _____

To be held from _____ to _____

Other Details: In case you have submitted the D.D and not completed the course earlier please furnish the details below with proof.

Demand Draft Details:

Name of Nationalized Bank	D.D. Number	Date	Amount

A. PERSONAL INFORMATION

1. Name: Dr./Mrs./Miss/Mr. : _____

2. Gender Male Female

3. Date of Birth : ____ / ____ / ____ (DD/MM/YY)

4. Educational Qualifications : _____

5. Category : SC ST VJ NT OBC OTHERS

6. Official Address : _____

7. Phone No. : Mobile _____ Fax _____

: E-mail _____

B. Employment Details

8. Subject : _____

9. Designation : _____

10. Department & College : _____

11. Affiliating University _____

12. Pay Scale : Pay Band :- _____ A.G.P. _____

: Present Basic Pay Rs. _____

C. Teaching Experience Details

13. Date of First Full Time Appointment: _____

14. Due Date of Placement : _____

15. Status of Present Appointment : Temporary Permanent

Adhoc / Contract On Probation

16. Length of Full Time Service Only: Years _____ Months _____ Days _____

17. Teaching Experience: _____ (U.G/P.G Excluding C.H.B.)

a. Degree College : Years _____

b. P.G. Department : Years _____

18. Administrative Experience : Years _____ Months _____

19. Details of Courses **already attended**: (Pl. writes the dates carefully)

Courses	ASC/Institution	Date	
		From	To
Orientation Programme			
Refresher Courses	1.		
	2.		
	3.		
Short Term Courses	1.		
	2.		
Others			

20. Mode of Journey: Train (AC III) / Bus Approximate T.A (Rs.) _____

21. Do you need hostel accommodation? : Yes No

22. Does your Institution belong to : Yes No
2(f)/12(B) of the UGC Act.

Declaration of Applicant

I hereby declare that all information furnished in this application form is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my application/admission is liable to be rejected/cancelled at any time.

Place _____

Date _____

(Signature of the Applicant)

ENDORSMENT BY AUTHORITY

I recommend Dr./Mr./Ms. _____ (Designation) _____
(Institution) _____ for
the Orientation Programme / Refresher Course / Short Term Course in _____
_____. He / She will be relieved on time to participate in the above
course at UGC- Human Resource Development Centre, SGBAU, Amravati, if selected. Certified
that this College is affiliated to _____ University
for the last five years. **Also certified that the details mentioned in the Application Form by him/her
were verified and found correct.**

Place: _____

Date: _____

Signature of Registrar /Principal
With Stamp

(Name: _____)

Important Notes :

1. C.H.B. experiences should not be counted while calculating the length of Service.
2. As per the revised guidelines from UGC, selected participants will have to pay registration fee (non-refundable) of Rs. 1000/- at the time of registration
3. Demand Draft of **Nationalized Bank** should be drawn in favor of “ **The Director, H.R.D.C, Sant Gadge Baba Amravati University**”, payable at **Amravati (Maharashtra State). Please Mention Your Name & Course Name in the Back Side of Your D.D.**
4. T.A./ Hospitality. will be paid to all the participants as per U.G.C Rules.
5. The completed application form should be sent to the address within last date given below:
To,
The Director, UGC-HRDC, S.G.B.A.U., Amravati - 444604
6. Incomplete form will be rejected.
7. It is mandatory to attend the course from inaugural programme of the course.
8. Details of pay band, grade pay & Due date of Placement & /date of First Full Time Appointment (See B-12, C-13, C,14)
10. Status of appointment should be written as per the appointment order of the institution / University if needs have to submit copy of appointment order.
11. Stamp of Authority/Principal is Mandatory.