(Para-1(1) of the statute)

### Check Slip for Promotion of Lecturer

## to the post of Reader under 10 yrs. Time Bound Scheme.

Statute as approved by Chancellor vide Letter no. - BSU- 27/85-4032/GS (1) Dated - 24-12-1986 Validity-01.02.1985(Para-12) to 22.09-1995

#### ( To be filled and Submitted by The University ) (See Para-11)

(In case of incomplete or ambiguous information, It will not be entertained by JPSC.)

1. 2.	Name ( Subjec	of the Candi t :	date :					
3.								
	(ii)It is	University I	Department or Constituent	College :				
	If Cons	stituent Colle	ge, mention date on which	College may Constituent : _				
4.	Name	of the Unive	rsity:					
5.	(i)	Date of Affili	ation : DDMMM		post creatio			YYYY
	. ,						o Chancellan fe	+ha
	(c) va Lectur		· · · · · · · · · · · · · · · · · · ·	sion/University Selection Co	JMMILLEE/ AD	surbed by in	e ruauceiini, ir	ır tue bast ai
6.		• •	missible period for promot	he conditions ( Para I(I)(a) of the ion to Reader ( Para I(I) of the i		Yes	No C	)
	SI.		Particulars		From	To	Dura	<u>tion</u>
	(a)	Period re	ndered in University depar	tment		-	Y Y M	M D D
	(Ь)	Period re University		nanaged and maintained by		-	YYM	M D D
	(c)	Period, if a	any in Affilated Degree Colleg	e, may be Constituent Status.			YYM	M D D
	(d)	Adjustmer	t of period rendered in servi	ce below Degree level (If Any),			YYM	M D D
	(e)	Total adm	issible period under Time l	Bound Scheme			YY	M D D
	(f)	Date of co	mpletion of ten years of cont	inuous service as Lecturer			D D M	M Y Y
7.	Propos	sed date of p	romotion to the post of Re	ader:			D D M	M Y Y
8.	Educat	ional Qualifi	cation of the Candidate :					
	Examin	ation	Board/University	Subject	Ye	ar of Passing	Division/Class	% of Marks
	Matri	C						
	11.	1		İ	ı		1	1

Examination	Board/University	Subject	Year of Passing	Division/Class	% of Marks
Matric					
Intermediate					
Graduation					
Post Graduate					
M.Phil/Ph.D					

Expert	Name	s nominated by Vice Chancel	Field of Activity	Designation	Location	Contact
I						
II						
		*: :::f UDN   _** N_	.: 402 dated : 27.03.20	17		
Reason for	ong pendency of promo	LIUN IN VIEW UI NKO LELLER NO				

Name of Candidate:

# Annexure-I (See SI. No. 9 of Check Slip) (See Para-2 of the Statute)

ar	CCR or Certifi	cate	If Certificate, please mention name	and designation of	Assessment report of Scree
			issuing authority in the corres	ponding year	Committee
_					
(i)	Period after 24.1 Enclose CCR in tl Give details as fo	he Pres	cribed Performa as approved by the C	Chancellor.	
(i)	Enclose CCR in th	he Pres	cribed Performa as approved by the C Whether CCR enclosed Yes/No		screening committee
(i)	Enclose CCR in to Give details as fo	he Pres			screening committee
(i)	Enclose CCR in to Give details as fo	he Pres			screening committee
(i)	Enclose CCR in to Give details as fo	he Pres			screening committee
(i)	Enclose CCR in to Give details as fo	he Pres			screening committee
(i)	Enclose CCR in to Give details as fo	he Pres			screening committee

Name of Candidate: