

DECLARATION FORM

1. Name of the Institution :

2. Name of the Faculty Member :

3. Date of Birth :

Recent Passport size photo attested by the Principal

Educational Qualifications (Beginning with)	College/ University	Year of passing	Percentage of marks (Aggregate)

5. Passed NET/ SLET : Yes Year of passing No.

6. Designation & Subject taught :

7. Date of appointment :

8. Nature of appointment : Permanent/ Temporary/ Adhoc / Honorary/ Part time

9. Scale of Pay :

10. Present basic pay :

11. Gross Salary per month : ₹
 (Salary is given in Cash/ Cheque/ Credited to my Bank A/c)

12. Provident Fund Number :

13. Whether belongs to : GM/ SC/ ST/ OBC others (Specify)

14. Residential Address :

Phone Number :

e-mail address :

Fax Number :

15 Details of appointments hold/ teaching experiences)

Name of Institution	Designation*	Nature of appointment **	From	To	Total Experience (In years)

16. I am not working at present in any other institution within or outside the state/ I am also working in the following Institution/s.

Name of the Institution	Designation*	Nature of appointment **	Emolument in Rupees per month

I hereby declare that all information furnished by me in this form are true.

Date:

Signature of the Employee

Verified and found correct

(Name and signature of the Principal)
With seal

Note: All the original documents pertaining to the information/s furnished above shall be made available to the LIC at the time of inspection.

* Lecturer/ Asst. Professor/ Reader/ Associate Professor/ Professor

** Permanent/ Temporary/ Adhoc / Honorary/ Part time