

SVPES College of Pharmacy

At. Isroli (TAJPORE), Po. Afwa, Ta. Bardoli, Dist. Surat, Bardoli - Navsari Road, Pin-394620

Post applied for: _____

Qualification & Specialization: _____

Please affix recent
Passport size
photograph

1. Full Name (in block letter) :
2. Date of Birth :, Age:.....
3. Phone No. with STD Code :; Mobile No.....
E-Mail address :
4. Permanent Address :
.....
..... Pin

5. Education Qualification:

Sr. No.	Examination passed	SEM	Result %	SEM	Result %	Qualifying % , class awarded	Name of Uni./College	Year of Passing
1.	Ph. D.							
2.	M. Pharm	Sem-1		Sem-3				
		Sem-2		Sem-4				
3.	B. Pharm	Sem-1		Sem-5				
		Sem-2		Sem-6				
		Sem-3		Sem-7				
		Sem-4		Sem-8				
4.	D. Pharm							

6. Experience:

Sr. No.			No. of Years	Name of Institute/ Organization	Post Held
1.	Teaching	Diploma			
		Degree			
2.	Industrial				

7. Others: Publication / Organizing Seminar / Presentation research papers, etc.: _____

8. Please give details of two references :

- | | |
|--------------------|--------------------|
| (i) Name: _____ | (ii) Name: _____ |
| Designation: _____ | Designation: _____ |
| Address: _____ | Address: _____ |
| Contact No.: _____ | Contact No.: _____ |
| E-mail: _____ | E-mail: _____ |

9. Are you willing to join as adhoc faculty? : Yes / No

10. Expected Salary: _____

- **IMPORTANT: Attached Necessary certificates and Documents**

DECLARATION

I declare that the statement made in this application are true to the best of my knowledge and belief. I understand that misleading or wrong information supplied may lead to summarily rejection of application / appointment if found subsequently.

Place:

Date:

.....
(Signature of Applicant)