

Charutar Vidya Mandal

VALLABH VIDYANAGAR – 388 120, TA & DIST. ANAND. GUJARAT (INDIA)

Qualifications / Experience as per norms of AICTE / PCI / UGC / CTE / GTU / Approval giving body or as per prevailing rules.

Vacant Teaching Posts

Pharmacy : Self Financed Courses (B.Pharm. & M.Pharm.)

(1) Indukaka Ipcowala College of Pharmacy (IICP) - www.iicp-cvm.edu.in

(2) A.R.College of Pharmacy & G.H.Patel Institute of Pharmacy(ARGH)- www.arghpharmacy.ac.in

Subjects	I.I.C.P.			A.R.G.H.		
	Prof.	Asso. Prof.	Asst. Prof.	Prof.	Asso. Prof.	Asst. Prof.
Pharmaceutics / Pharmaceutical Technology	--	01	02	--	01	01
Pharma.Chem. / Pharm. Anal. / Pharm. Quality Assurance	01	01	03	01	01	01
Pharmacology / Clinical Pharmacy	--	01	02	01	--	01
Pharmacognosy	--	01	02	--	01	--

QUALIFICATIONS / EXPERIENCE (PHARMACY)

Sr. No.	Cadre	Prescribed Qualifications and Experiences (As per AICTE / PCI / GTU / CTE Norms) :
1	Professor	Bachelors and Masters Degree in appropriate branch of Pharmacy with First Class or equivalent either in Bachelors or Masters Degree and Ph.D. or equivalent, in appropriate discipline. Post Ph.D. publications and guiding Ph.D. students is highly desirable. Minimum of 10 years teaching and/or research and/or industrial experience of which at least 5 years should be at the level of Associate Professor. OR Minimum of 13 years experience in teaching.
2	Associate Professor	Bachelors and Masters Degree in appropriate branch of Pharmacy with First Class or equivalent either in Bachelors or Masters Degree and Ph.D. or equivalent, in appropriate discipline. Post Ph.D. publications and guiding Ph.D. student is highly desirable. Minimum of 5 years experience in teaching and/or research and/or industry of which at least 2 years shall be post Ph.D. is desirable.
3	Assistant Professor	Bachelors and Masters Degree in appropriate branch of Pharmacy with First Class or equivalent either in Bachelors or Masters Degree.

Charutar Vidya Mandal
Vallabh Vidyanagar – 388 120, Dist. Anand, GUJARAT

Pay Scales and other conditions as per CVMandal rules.

Candidate should have cleared NET / SLET / Ph.D. where applicable. The candidates should be proficient in English.

The completed application form alongwith attested copies of the certificates, testimonials, marksheets etc. should reach the **Hon. Secretary** at the above address on or before **01/12/2017**. **The name of the post applied for be mentioned on the envelope.**

- ❖ Residential facilities are available.
- ❖ Educational facilities from K.G. to P.G. levels are available on the campus for both Gujarati and English Media.

CHARUTAR VIDYA MANDAL

VALLABH VIDYANAGAR – 388 120,
TA & DIST. ANAND. GUJARAT (INDIA)

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Last Date for Receipt of Application: **01/12/2017**

Application form for the **teaching post** of: _____ in subject of _____

NOTE :

- (a) **The person already in employment should forward the application through the employer.**
- (b) The application should be submitted alongwith attested copies of the relevant certificates, mark sheets, testimonials etc.
- (c) Additional sheets of paper may be attached if the space provided against any item is insufficient.
- (d) Candidate should be proficient in English.
- (e) Candidate should apply separately for each subject / post.
- (f) Minimum Qualifications, Experience and Age Limit as per norms of AICTE / PCI / UGC / CTE / GTU / *Approval giving body or as per prevailing rules.*
- (g) **Candidate is required to mention e-mail address and Mobile number.**
- (h) **Candidate is required to fill in the form for calculating API's as per AICTE regulations and Gujarat State amended rules.** Candidate is also required to submit all the documentary evidence in connection to their API. (where ***applicable or if need be***).
- (i) *Actual requirements may change at the time of interview.*
- (j) **State Pharmacy Council Registration is required. (Copy to be enclosed)**

1. Name in full (**in Block Letters**) :
Shri
Smt. _____
Kum. _____ (SURNAME) _____ (NAME) _____ (FATHER'S / HUSBAND'S NAME)

2. Full address for correspondence:

Present

_____ Pin _____

Mob./ Phone No. : _____

Permanent

_____ Pin _____

Phone No.: _____

E-Mail ID: _____

3. Date of Birth: _____ Age: _____

Nationality: _____ Mother tongue _____

4. Place of Birth : Town / Village: _____ Tal. _____

Dist.: _____ State _____

5. Languages Known :

Read				
Write				
Speak				

6(a). Educational Qualifications: (Beginning with HSC Exam.)

Examination Passed	University / Board	Year of Passing	Percentage	Subjects / Discipline

6(b). State Pharmacy Council: _____ Registration Number: _____

7. Details of Professional Experience: (After obtaining the basic Degree)

Name & Address of the Employer	Designation of the post held	Period of Service From: To	Nature of Service	Total Salary drawn p.m. (Rs.)

(a) As Employee other than Teaching Staff: _____

(b) As a Teaching Staff: _____

8. Research experience with details of research papers and articles published:

9. Details of Publications, if any:

Book / Monograph, etc.

Title	Month / Year	Name of Publisher

10. Details of any other innovations / activity involved during professional career:

11. Present Designation: _____ Institute: _____

Date of Joining present post: _____

Present Basic Pay Rs. _____ Pay Scale _____

Total emoluments, pm. Rs. _____

Date of next increment Rs. _____

11(a). Salary Expected Rs. _____

12. Name and Address of two persons for reference who are not related to the candidate but who are acquainted with the work and character of the candidate:

(1)

(2)

_____	_____
_____	_____
_____	_____

13. List of Testimonials / Certificates / Marksheets of which copies are attached with the application:

- | | |
|----|----|
| 1. | 5. |
| 2. | 6. |
| 3. | 7. |
| 4. | 8. |

14. Whether the candidate is convicted for any offence under any Civil / Criminal Law?
(If yes, provide the details) **Yes / No**

15. Whether any Civil / Criminal Case is pending?
(If yes, provide the details) **Yes / No**

16. Computer Knowledge.
(If yes, provide the details) **Yes / No**

I hereby declare that the information given above is true and correct to the best of my knowledge, information and belief.

PLACE: _____

DATE: _____

Signature of the Candidate