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 **SREE CHAITANYA**  
EDUCATIONAL INSTITUTIONS  
LMD Colony, Thimmapur, Karminagar, A. P., India – 505527  
Website : [www.scce.ac.in](http://www.scce.ac.in), Ph.: 0878 – 2223110, 9177735557

**WALK-IN INTERVIEW**  
Takshasila Educational Society invites faculty for positions of  
**Professor / Assoc. Professor /Asst. Professors**  
in Engineering & Pharmacy College as below.

**Humanities, Science & Math's**

English, Physics & Chemistry	04 <sup>th</sup> May 2013
Maths & Statistics	06 <sup>th</sup> May 2013

**PHARMACY**

Pharmaceutics & Pharmacology	07 <sup>th</sup> May 2013
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**ENGINEERING**

Electrical & Electronics Engineering	08 <sup>th</sup> May 2013
Electronics & Comm. Engineering	09 <sup>th</sup> May 2013
MBA (Finance, Marketing & HR)	10 <sup>th</sup> May 2013
Civil & Mechanical Engineering	11 <sup>th</sup> May 2013

**Lab Assistants**

Electrical, Civil & Mech. Engg.   Pharmacy	09 <sup>th</sup> May 2013
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Qualification & Pay as per AICTE Norms, Higher salary for deserved. Bring C.V, 2 photos, all certificates from SSC onwards.  
- Secretary & Correspondent

**Fill the Following Application Form**



Affix recent  
passport size  
color  
photograph

To

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Respected Sir,

Sub: Application for the post of \_\_\_\_\_ - Reg.

- - -

It is learnt that you are recruiting hands for the post of \_\_\_\_\_ and  
As such I submit this application for favour of your kind consideration.

I submit here under my detailed biographical particulars for favour of your kind perusal and  
consideration.

**BIO-DATA**

1. Name of the Teaching Staff : \_\_\_\_\_
2. Date of Birth : \_\_\_\_\_
3. Designation : \_\_\_\_\_
4. Department : \_\_\_\_\_
5. Date of Joining the Institution : \_\_\_\_\_
6. Education Qualification with Class / Grade :  
Ph.D. \_\_\_\_\_  
P.G. \_\_\_\_\_  
U.G. \_\_\_\_\_  
Others, if any, \_\_\_\_\_
7. Total Experience : (a) Teaching: \_\_\_\_\_ (b) Research: \_\_\_\_\_  
(c) Industry: \_\_\_\_\_ (d) Others: \_\_\_\_\_ Total: \_\_\_\_\_
8. Area of Specializations : \_\_\_\_\_
9. Subjects teaching at (a) Under Graduate Level : \_\_\_\_\_  
(b) Post Graduate Level : \_\_\_\_\_
10. Projects guided (if applicable) at : (a) UG Level: \_\_\_\_\_ (b) PG Level: \_\_\_\_\_ (c) Ph.D. Level: \_\_\_\_\_
11. No. of Papers published in : National Journals: \_\_\_\_\_ International Journals: \_\_\_\_\_  
Conferences: \_\_\_\_\_ Publications, If any: \_\_\_\_\_
12. Ph.D. Guide, University, Specialization: \_\_\_\_\_
13. Books Published / IPRs / Patents : \_\_\_\_\_
14. Professional Membership : \_\_\_\_\_
15. Consultancy Activities : \_\_\_\_\_
16. Awards : \_\_\_\_\_
17. Grants Fetched : \_\_\_\_\_
18. Interaction with Professional Institutions: \_\_\_\_\_

In view of the above, I request you to be kind enough to give an opportunity to serve your esteemed organization in the capacity mentioned above, for which act of kindness, I shall be very thankful and grateful to you.

Thanking you,

Yours truly,

Place:

Date:

[ \_\_\_\_\_ ]

## **FACULTY DETAILED RECORD**

Surname \_\_\_\_\_ First Name \_\_\_\_\_

Last Name \_\_\_\_\_ Father's Name: \_\_\_\_\_

Mother Name \_\_\_\_\_ Religion \_\_\_\_\_ Caste/Sub-Caste \_\_\_\_\_

Pan Card No. \_\_\_\_\_ PF.No. \_\_\_\_\_ Bank Account No. \_\_\_\_\_

Bank Name \_\_\_\_\_ Email ID: \_\_\_\_\_

Address: \_\_\_\_\_

State \_\_\_\_\_ Pin Code: \_\_\_\_\_ Phone No. \_\_\_\_\_

### **I - ACADEMIC PROFILE:**

Sl. No.	Course	School/College/University	Year of passing	Percentage of Marks	Division / Grade	Xerox Copies Enclosed
1.	SSC					
2.	Inter/Diploma					
3.	UG _____					
4.	PG _____					
5.	Ph.D.					
6.	Others _____					
7.	Others _____					

### **II – EXPERIENCE PROFILE:**

Sl. No.	Organization	Designation		Date		Salary		Xerox Copies enclosed		
		At the time of joining	At the time of relieving	From	To	At the time of joining	At the time of relieving	Appointment Order	Experience / Salary Certificate	Relieving Order

### **III- SEMINARS / WORKSHOPS / CONFERENCE:**

Sl. No.	Title Of Conference / Seminar / Workshop	Conducted by	Conducted at	Dates	Sponsored by

**IV – EXTRA ACTIVITIES (IF ANY):** \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_