

आयुक्तालय कॉलेज शिक्षा राजस्थान, जयपुर

क्र. F1(2)(238)PS/PCE/23/289

दिनांक 19.6.2023

1. समस्त प्राचार्य,
राजकीय महाविद्यालय, राजस्थान
2. सहायक निदेशक, क्षेत्रीय कार्यालय कॉलेज शिक्षा
जयपुर/जोधपुर/उदयपुर/अजमेर/कोटा/बीकानेर

विषय - राजस्थान शिक्षा सेवा (महाविद्यालय शाखा) नियम 1986 के नियम 26ख के अंतर्गत सहायक आचार्य (वरिष्ठ वेतनमान), सहायक आचार्य (चयनित वेतनमान), सह आचार्य के पद पर कैरिअर एडवांस स्कीम के तहत पदोन्नति हेतु आवेदन पत्र मांगे जाने हेतु -

सन्दर्भ- 1. आकाशी क्र. एफ 1 (2)(166) पीएस/निकाशी/ 19/205/ दिनांक 12.11.2022

2. आकाशी क्र. एफ 1 (92) पीएस/निकाशी/13/173/ दिनांक 3.01.2023

कार्मिक (क गुप -2) विभाग राजस्थान सरकार द्वारा महाविद्यालय के शिक्षको को कैरिअर एडवांस स्कीम योजना के अंतर्गत सहायक आचार्य (वरिष्ठ वेतनमान), सहायक आचार्य (चयनित वेतनमान), सह आचार्य / आचार्य के पद पर पदोन्नत किये जाने हेतु दिनांक 14.10.2022 को अधिसूचना जारी कर राजस्थान शिक्षा सेवा (महाविद्यालय शाखा) संशोधन नियम 2022 लागू किये गए हैं।

कैरिअर एडवांस स्कीम के अंतर्गत सहायक आचार्य (वरिष्ठ वेतनमान), सहायक आचार्य (चयनित वेतनमान), सह आचार्य के पद पर पदोन्नत किये जाने हेतु आवेदन प्राप्त करने की प्रक्रिया समयबद्ध एवम सुव्यवस्थित क्रियान्वयन हेतु निम्नानुसार कार्यवाही की जानी है -

- a. सभी पात्र शिक्षक जिन्होंने अधिसूचना 14.10.2022 की पालना में दिनांक 13.01.2023 तक विकल्प पत्र विधिवत रूप से भरा हुआ है वे अपने विकल्प के अनुसार पूर्व के नियमों (अधिसूचना राज्य सरकार दिनांक 8.5.2013 एवं 31.1.2018) के अंतर्गत भी आवेदन कर सकते हैं, आवेदन पत्र के अंत में विकल्प पत्र की प्रति संलग्न किया जाना आवश्यक है।
- b. दिनांक 31.3.2023 तक पदोन्नति हेतु पात्र शिक्षक आवेदन कर सकते हैं।
- c. वरिष्ठ वेतनमान, चयनित वेतनमान एवं सह आचार्य हेतु विभिन्न निर्धारित आवेदन पत्र के प्रारूप संलग्न हैं।
- d. आवेदन पत्र के सभी पृष्ठों व संलग्नको को आवेदक से स्वयं सत्यापित कर प्रस्तुत करवाया जाना आवश्यक है।
- e. प्राचार्य द्वारा अपने महाविद्यालय के पात्र शिक्षको के प्राप्त आवेदन पत्रों की जाँच कर नोडल महाविद्यालय को दिनांक 1.7.2023 तक प्रेषित करवाया जाना है।

41

- f. नोडल महाविद्यालय की IQAC समिति प्राप्त आवेदन पत्रों की जाँच कर एपीआई स्कोर/ग्रेडिंग (चुने हुए विकल्प के अनुसार) की गणना कर आवेदन पत्र के साथ संलग्न प्रपत्र में भरकर आवेदन पत्र की स्कैन कॉपी email- hrd.cce@gmail.com पर एवं मूल प्रति आयुक्तालय को दिनांक 8.7.2023 तक प्रस्तुत करवाया जाना है ।
- g. आवेदन पत्रों की जाँच हेतु नोडल महाविद्यालयों की सूची आयुक्तालय के आदेश क्रमांक एफ1(92) निकाशी13/पार्ट/ 179 दिनांक 5.1.2023 के पर उपलब्ध है, के, अनुसार कार्यवाही की जानी है

महाविद्यालय में आवेदन पत्र प्रेषित करने की अंतिम तिथि	दिनांक 28.6.2023 तक
नोडल महाविद्यालय को आवेदन पत्र प्रेषित करने की अंतिम तिथि	दिनांक 1.7.2023 तक
नोडल महाविद्यालय की IQAC द्वारा आवेदन पत्रों की जाँच कर आयुक्तालय आवेदन पत्र प्रेषित करने की अंतिम तिथि	दिनांक 8.7.2023 तक
IQAC द्वारा hrd.cce@gmail.com द्वारा share गूगल स्प्रेडशीट पर सूचनाएं भरने की अंतिम दिनांक	दिनांक 11.7.2023 तक

(सुनील शर्मा)

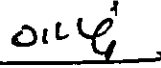
आयुक्त

कॉलेज शिक्षा राजस्थान

जयपुर

प्रतिलिपि-

- निजी सचिव, आयुक्त, कॉलेज शिक्षा, राजस्थान जयपुर
- समस्त प्राचार्य, राजकीय महाविद्यालय, राजस्थान
- सहायक निदेशक, क्षेत्रीय कार्यालय कॉलेज शिक्षा जयपुर/जोधपुर/ उदयपुर /अजमेर/कोटा/बीकानेर
- वेबसाइट प्रभारी -कृपया विभागीय वेबसाइट पर अपलोड करे
- रक्षित पत्रावली



संयुक्त निदेशक (HRD)

कॉलेज शिक्षा राजस्थान, जयपुर

COMMISSIONERATE COLLEGE EDUCATION RAJASTHAN, JAIPUR

APPLICATION FORM FOR ASSISTANT PROFESSOR (SENIOR SCALE) - (As per 14-10-2022)

(Proforma for Assessment Criteria and Methodology for College Teachers)

Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):			
2	Father's /Mother's /Husband's name:			
3	Subject			
4	Date of birth			
5	Current Designation & Grade Pay:			
6	Present Posting place			
7	Appointment order no. and Date			Annexure No.
8	Date of Joining after regular selection by RPSC under RES rules 1986			Annexure No.
9	Mobile number			
	Email:			
10	Post PG Qualifications (In relevant Subject)			
	Degree	University	Date of Award	Annexure No.
	M. Phil.			
	Ph. D.			

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

11 Details of Extraordinary leaves (EOL) if availed during the assessment period.						
From	To	Total No of Days	Purpose of EOL	Sanction Order No. & Date	Annexure No.	
12 Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non – Teaching department related with assessment period. (if applicable)						
University/ Department/ Institute	Post held	Nature of work performed	From	To	Order No. with date	Annexure No.
13 Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16/17)						
If yes, mention details and latest status:						Annexure No.
Decision if finalized:						
14 Have you filed IPR of this year :						Annexure No.
15 Have you attached child declaration form						Annexure No.
16 Due date of senior scale promotion applied for as per fulfilment of eligibility of CAS:			Eligibility Date			

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

Details of Orientation Course/Refresher Courses/Research Methodology Course/Workshops/Methodology Workshop/Syllabus Up-Gradation Workshop/Teaching-Learning-Evaluation Technology Programs/Faculty Development Programs/MOOC course (with e-certification) Completed in the Current Assessment Period:

Name of the Course	Sponsoring Agency	Place	No. of Days	From	To	Annexure No.

None

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

None

PART-B
APPENDIX II, TABLE I

(Assessment Criteria and Methodology for College Teachers as per UGC Regulations 2018)

1. TEACHING (activity I): (Classes taught includes sessions on tutorials, lab and other teaching related activities)

Academic Year	Date	TEACHING		Grading by IQAC	*Encl No.
		Total Classes Assigned	Number of Classes Taught		
Year 1					
Year 2					
Year 3					
Year 4					
Year 5					
Year 6					
Under deputation period		Place of deputation-			

Grading Criteria: 80% & Above – Good; Below 80% but 70% & Above – Satisfactory; Less than 70% – Not Satisfactory Classes taught include sessions on tutorials, labs, virtual classes and other teaching related activities.

Note: For the purpose of assessing the grading of Activity at Serial No. 1 and Serial No. 2, all such periods of duration which have been spent by the teacher on different kinds of paid leaves such as Maternity Leave, Child Care Leave, Study Leave, Medical Leave, Extraordinary Leave and Deputation shall be excluded from the grading assessment. The teacher shall be assessed for the remaining period of duration and the same shall be extrapolated for the entire period of assessment to arrive at the grading of the teacher. The teacher on such leaves or deputation as mentioned above shall not be put to any disadvantage for promotion under CAS due to his/her absence from his/her teaching responsibilities subject to the condition that such leave/deputation was undertaken with the prior approval of the competent authority following all procedures laid down in these regulations and as per the acts, statutes and ordinances of the parent institution.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

Signature of Applicant with Date

Ducic

2. INVOLVEMENT IN THE TEACHER- STUDENTS RELATED ACTIVITIES / RESEARCH ACTIVITIES (Activity 2):

	Activity	Details of Work Done	Total No. of Activities Done	Grading by the IQAC	Annexure No
Academic Year	a. Administrative responsibilities such as Head/Chairperson/ Dean/ Director/ Co-ordinator, Warden etc. b. Examination and evaluation duties assigned by the college / university or attending the examination paper evaluation. c. Student related co-curricular, extension and field based activities such as student clubs, career counselling, study visits, student seminars and other events, cultural, sports, NCC, NSS and community services. d. Organising seminars/ conferences/ workshops, other college/university activities. e. Evidence of actively involved in guiding Ph.D students. f. Conducting minor or major research project sponsored by national or international agencies. g. At least one single or joint publication in peer reviewed or UGC list of Journals.				
Year 1					
Year 2					

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

Year 3						
Year 4						
Year 5						
Year 6						

one

* Should be claimed by the applicant with supporting documents..

Note: Number of activities can be within or across the broad categories of activities. Refer Part B, Activity 2.
 I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

SUMMARY OF SCORES (For Assistant Professor -Senior Scale)

S. No.	Activity	Overall Grading (Verified and Fill by IQAC)					
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Table I	Activity-1 (Teaching)						
	Activity-2 (student related activities/research activities)						
	*Overall Grading on the Basis of Activity-1 and Activity-2						

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-II/84 dated 14/10/2022, We the members of IQAC as enlisted below have checked and verified the Grading/ Academic/Research Score awarded above.

NAME OF ASSIST / ASSO. /PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSIST / ASSO. / PROFESSOR	SUBJECT	SIGNATURE

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personel file from page no..... to.....

Signature of Principal With seal & date

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

कार्मिक विभाग की विज्ञापित क्रमांक एफ. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

सैं	पद	कार्यालय	दिनांक:
को एतद्विषयगत करता हूँ कि:-			

1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्या थी।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
4		

2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या ----- है।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
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दिनांक: हस्ताक्षर
नाम: पद: विभाग:

नोट : जो लागू नहीं हो, वह काट दें।

मेरे समक्ष हस्ताक्षर किये।

(कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

2014

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

APPLICATION FORM FOR ASSISTANT PROFESSOR (SELECTION SCALE) - (As per 14-10-2022)

(Proforma for Assessment Criteria and Methodology for College Teachers)

Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):				
2	Father's /Mother's /Husband's name:				
3	Subject				
4	Date of birth				
5	Current Designation & Grade Pay:				
6	Present Posting place				
7	Appointment order no. and Date				Annexure No.
8	Date of Joining after regular selection by RPSC under RES rules 1986				Annexure No.
9	Mobile number				
	Email:				
Details of last CAS Promotions: (Senior scale)					
10	Scale	Order No. with date	Date of Promotion(dd/mm/yy)	Annexure No.	
	Assistant Professor (Senior Scale)(L-11)				
11	Post PG Qualifications (In relevant Subject)				
	Degree	University		Date of Award	Annexure No.
	M. Phil.				
	Ph. D.				

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

over

12 Details of Extraordinary leaves (EOL) if availed during the assessment period.						Annexure No.
From	To	Total No of Days	Purpose of EOL	Sanction Order No. & Date		
13 Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non – Teaching department related with assessment period. (if applicable)						
University/ Department/ Institute	Post held	Nature of work performed	From	To	Order No. with date	Annexure No.
14 Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16/17)						
If yes, mention details and latest status: Decision if finalized:						Annexure No.
15 Have you filed IPR of this year :						Annexure No.
16 Have you attached child declaration form						Annexure No.
17 Due date of Selection scale promotion applied for as per fulfilment of eligibility of CAS:			Eligibility Date			

Over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

18 Details of Refresher Courses/Research Methodology Course/Workshops/Methodology Workshop/Syllabus Up- Gradation Workshop/Teaching-Learning-Evaluation Technology Programs/ Faculty Development Programs/MOOC course (with e-certification) Completed in the Current Assessment Period:						
Name of the Course	Sponsoring Agency	Place	No. of Days	From	To	Annexure No.

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

PART-B
APPENDIX II, TABLE I

(Assessment Criteria and Methodology for College Teachers as per UGC Regulations 2018)
1. TEACHING (activity I): (Classes taught includes sessions on tutorials, lab and other teaching related activities)

Academic Year	Date	TEACHING			Grading by IQAC	*Encl No.
		Total Classes Assigned	Number of Classes Taught	Teaching= (Number of Classes Taught / Total Classes Assigned) X 100%		
Year 1						
Year 2						
Year 3						
Year 4						
Year 5						
Under deputation per year		Place of deputation-				

Grading Criteria: 80% & Above – Good; Below 80% but 70% & Above – Satisfactory; Less than 70% – Not Satisfactory Classes taught include sessions on tutorials, labs, virtual classes and other teaching related activities.

Note: For the purpose of assessing the grading of Activity at Serial No. 1 and Serial No. 2, all such periods of duration which have been spent by the teacher on different kinds of paid leaves such as Maternity Leave, Child Care Leave, Study Leave, Medical Leave, Extraordinary Leave and Deputation shall be excluded from the grading assessment. The teacher shall be assessed for the remaining period of duration and the same shall be extrapolated for the entire period of assessment to arrive at the grading of the teacher. The teacher on such leaves or deputation as mentioned above shall not be put to any disadvantage for promotion under CAS due to his/her absence from his/her teaching responsibilities subject to the condition that such leave/deputation was undertaken with the prior approval of the competent authority following all procedures laid down in these regulations and as per the acts, statutes and ordinances of the parent institution.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

2. INVOLVEMENT IN THE TEACHER-STUDENTS RELATED ACTIVITIES / RESEARCH ACTIVITIES (Activity 2):

Academic Year	Activity	Details of Work Done	Total No. of Activities Done	Grading by the IQAC	Annexur e No
Year 1	<ul style="list-style-type: none"> a. Administrative responsibilities such as Head/Chairperson/ Dean/ Director/ Co-coordinator, Warden etc. b. Examination and evaluation duties assigned by the college / university or attending the examination paper evaluation. c. Student related co-curricular, extension and field based activities such as student clubs, career counseling, study visits, student seminars and other events, cultural, sports, NCC, NSS and community services. d. Organizing seminars/ conferences/ workshops, other college/university activities. e. Evidence of actively involved in guiding PhD students. f. Conducting minor or major research project sponsored by national or international agencies. g. At least one single or joint publication in peer reviewed or UGC list of Journals. 				
Year 2					

done

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

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8
7
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2
1

Year 3							
Year 4							
Year 5							

2014

* Should be claimed by the applicant with supporting documents..

Note: Number of activities can be within or across the broad categories of activities. Refer Part B, Activity 2.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

10
11
12

SUMMARY OF SCORES (For Assistant Professor -Selection Scale)

S. No.	Activity	Overall Grading (Verified and Fill by IQAC)				
		Year 1	Year 2	Year 3	Year 4	Year 5
Table 1	Activity-1 (Teaching)					
	Activity-2 (student related activities/research activities)					
	*Overall Grading on the Basis of Activity-1 and Activity-2					

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-11/84 dated 14/10/2022, We the members of IQAC as enlisted below have checked and verified the Grading/ Academic/Research Score awarded above.

NAME OF ASSIST / ASSO. /PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSIST / ASSO. / PROFESSOR	SUBJECT	SIGNATURE

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personal file from page no..... to.....

Signature of Principal With seal & date

DUK

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

10/10/2010

कार्मिक विभाग की विशिष्ट क्रमांक एफ. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

श्रे	पद	कार्यालय	दिनांक:
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को एतदघोषणा करता हूँ कि:-

1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्याथी।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
4		

2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या है।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
4		

दिनांक:	हस्ताक्षर	पद:	विभाग:
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नोट : जो लागू नहीं हो, वह काट दें।

मेरे समक्ष हस्ताक्षर किये।

(कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

01/10/10

COMMISSIONERATE COLLEGE EDUCATION RAJASTHAN, JAIPUR

APPLICATION FORM FOR ASSOCIATE PROFESSOR - (As per 14-10-2022)

(Proforma for Assessment Criteria and Methodology for College Teachers).

Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):				
2	Father's /Mother's /Husband's name:				
3	Subject				
4	Date of birth				
5	Current Designation & Grade Pay:				
6	Present Posting place				
7	Appointment order no. and Date				Annexure No.
8	Date of regular Joining (After regular selection by RPSC under RES rules 1986)				Annexure No.
9	Mobile number				
	Email:				
Details of last CAS Promotions: (Senior scale)					
10	Scale	Order No. with date	Date of Promotion(dd/mm/yy)	Annexure No.	
	Assistant Professor (Senior Scale)(L-11)				
	Assistant Professor (Selection Scale)(L-12)				
11	Post PG Qualifications (In relevant Subject)				
	Degree	University	Date of Award	Annexure No.	
	Ph. D.				

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

12	Details of Extraordinary leaves (EOL) if availed during the assessment period.						Annexure No.
	From	To	Total No of Days	Purpose of EOL	Sanction Order No. & Date		
13	Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non – Teaching department related with assessment period. (if applicable)						Annexure No.
	University/ Department/ Institute	Post held	Nature of work performed	From	To	Order No. with date	
14	Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16/17)						Annexure No.
	If yes, mention details and latest status:						
	Decision if finalized:						
15	Have you filled IPR of this year :						Annexure No.
16	Have you attached child declaration form						Annexure No.
17	Due date of Associate Professor promotion applied for as per fulfilment of eligibility of CAS:			Eligibility Date			

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

18 Details of Refresher Courses/Research Methodology Course/Workshops/Methodology Workshop/Syllabus Up- Gradation Workshop/Teaching-Learning-Evaluation Technology Programs/ Faculty Development Programs/MOOC course (with e-certification) Completed in the Current Assessment Period:						
Name of the Course	Sponsoring Agency	Place	No. of Days	From	To	Annexure No.

0114

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

PART-B
APPENDIX II, TABLE I

(Assessment Criteria and Methodology for College Teachers as per UGC Regulations 2018)
1. TEACHING (activity I): (Classes taught includes sessions on tutorials, lab and other teaching related activities)

Academic Year	Date	TEACHING			Grading by IQAC	*Encl No.
		Total Classes Assigned	Number of Classes Taught	Teaching= (Number of Classes Taught / Total Classes Assigned) X 100%		
Year 1						
Year 2						
Year 3						
Under deputation per year		Place of deputation-				

Grading Criteria: 80% & Above – Good; Below 80% & Above – Satisfactory; Less than 70% – Not Satisfactory Classes taught include sessions on tutorials, labs, virtual classes and other teaching related activities.

Note: For the purpose of assessing the grading of Activity at Serial No. 1 and Serial No. 2, all such periods of duration which have been spent by the teacher on different kinds of paid leaves such as Maternity Leave, Child Care Leave, Study Leave, Medical Leave, Extraordinary Leave and Deputation shall be excluded from the grading assessment. The teacher shall be assessed for the remaining period of duration and the same shall be extrapolated for the entire period of assessment to arrive at the grading of the teacher. The teacher on such leaves or deputation as mentioned above shall not be put to any disadvantage for promotion under CAS due to his/her absence from his/her teaching responsibilities subject to the condition that such leave/deputation was undertaken with the prior approval of the competent authority following all procedures laid down in these regulations and as per the acts, statutes and ordinances of the parent institution.

DIVE

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

2. INVOLVEMENT IN THE TEACHER-STUDENTS RELATED ACTIVITIES / RESEARCH ACTIVITIES (Activity 2):

Academic Year	Activity a. Administrative responsibilities such as Head/Chairperson/ Dean/ Director/ Co-coordinator, Warden etc. b. Examination and evaluation duties assigned by the college / university or attending the examination paper evaluation. c. Student related co-curricular, extension and field based activities such as student clubs, career counseling, study visits, student seminars and other events, cultural, sports, NCC, NSS and community services. d. Organizing seminars/ conferences/ workshops, other college/university activities. e. Evidence of actively involved in guiding PhD students. f. Conducting minor or major research project sponsored by national or international agencies. g. At least one single or joint publication in peer reviewed or UGC list of Journals.	Details of Work Done	Total No. of Activities Done	Grading by the IQAC	Annexure No
Year 1					
Year 2					
Year 3					

* Should be claimed by the applicant with supporting documents..

Note: Number of activities can be within or across the broad categories of activities. Refer Part B, Activity 2.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

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SUMMARY OF SCORES (For Associate Professor)

S. No.	Activity	Overall Grading (Verified and Fill by IQAC)		
		Year 1	Year 2	Year 3
Table I	Activity-1 (Teaching)			
	Activity-2 (student related activities/research activities)			
	*Overall Grading on the Basis of Activity-1 and Activity-2			

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-II/84 dated 14/10/2022, We the members of IQAC as enlisted below have checked and verified the Grading/ Academic/Research Score awarded above.

NAME OF ASSIST / ASSO. /PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSIST / ASSO. / PROFESSOR	SUBJECT	SIGNATURE

DUK

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personal file from page no..... to.....

Signature of Principal With seal & date

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

कार्मिक विभाग की विशिष्ट क्रमांक एक. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

सै	पद	कार्यालय	दिनांक:
----	----	----------	---------

को एतद्विषया करता हूँ कि:-

1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्याथी।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
4		

2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या -----है।

क्र.सं.	नाम	जन्म तिथि
1		
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दिनांक: हस्ताक्षर
नाम: पद: विभाग:

नोट : जो लागू नहीं हो, वह काट दें।

मेरे समक्ष हस्ताक्षर किये। (कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

21/11/21

COMMISSIONERATE COLLEGE EDUCATION RAJASTHAN, JAIPUR
APPLICATION FORM FOR ASSISTANT PROFESSOR (SENIOR SCALE) - (As per 31-01-2018)
 Self-Assessment for the Performance Based Appraisal System (PBAS)
 Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):		
2	Father's /Mother's /Husband's name:		
3	Subject		
4	Current Designation & Grade Pay:		
5	Address for correspondence (With Pincode):		
	Mobile No.:		
6	(i) No & Date of Appointment order:	Annexure No.	(ii) Date of joining after regular selection:
7	(iii) Present posting place		
	Post PG Qualifications(In relevant Subject)		
	Degree	University	Date of Award
	M. Phil.		
	Ph. D.		
8	Details of Orientation, Refresher Courses /Research Methodology course of 2/3 week duration.		
	Name of the Course	Sponsoring Agency	Place
			No. of Days
			From
			To
			Annexure No.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

over

9	Details of Extraordinary leaves (EOL) if availed during the assessment period.				Purpose of EOL		Sanction Order No. & Date	Annexure No.	
	From	To	Total No of Days						
10	Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non -- Teaching department related with assessment period. (if applicable)				From	To	Order No. with date	Annexure No.	
	University/ Department/ Institute	Post held	Nature of work performed						
11	Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16/17)? Yes/No								
	If yes, mention details and latest status :								
12	Decision if finalized:								
	Has any adverse entry in any APPAR of assessment period marked by the reviewing officer?				Number	If yes, Provide details			Annexure No.
13	If yes, mention the year and letter number with date				Number	Date			Annexure No.
	Have you filled IPR of this year :								
14	Due date of promotion applied for as per fulfilment of eligibility of CAS:				Promotion Post		Eligibility Date		

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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PART -B

**ACADEMIC PERFORMANCE INDICATORS (A.P.I.)
CATEGORY: 1. TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES**

1.1-2 Lectures, seminars, tutorials, practicals, contact hours taken as percentage of lectures allocated, Lectures or other teaching duties in excess of the UGC norms .

Year	Assessment Period		Academic Session		No of classes per week allotted	Total Number of classes		Percentage of classes taken (column 8 / column 7x100)	API (Max 50)	API Teaching Load in excess of UGC norm (Max 10)	TOTAL API (Max 60) (10+11)	Annexure No.
	From	To	From	To		As per Documented record (Net of Leave days) *	Actually conducted					
1	2	3	4	5	6	7	8	9	10	11	12	

* Adjusting no of days in which teaching was not done due to leave/ Training/Deputation / Fellowship duly sanctioned by competent authority.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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1.3 Preparation and Imparting of knowledge / instruction as per curriculum; syllabus enrichment by providing additional resources to students.

Year	Assessment Period		Academic Session		Consulted	Description of Reading / Instructional material		API Score (Max. Score 20)	Annexure No.
	From	To	From	To		Prescribed	Provided to students		
1	2	3	4	5	6	7	8	9	10

and

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.4 Use of participatory and innovative teaching-learning methodologies; updating of subject content, course improvement etc.

Year	Assessment Period		Academic Session		Use of participatory and innovative teaching-learning methodologies (Max. Score 10)	Short description of	Updating of subject content & Course improvement (Max. Score 10)	API Score (Max. Score 20)	Annexure No.
	From	To	From	To					
1	2	3	4	5	6		7	8	9

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.5. Examination duties (Invigilation; question paper setting, evaluation/assessment of answer scripts) as per allotment.

Year	Assessment Period		Academic Session		Invigilation Duties * (Max score 10)			Examination duties			API Score (Max score 25)	Annexur e No.
	From	To	From	To	Allotted	Performed	Extent to which carried out (%) (7/6x100)	Question paper setting (Max score 5)	Evaluation of answer scripts assessed (Max score 5)	Coordination or flying squad duties (Max score 10)		
1	2	3	4	5	6	7	8		9	10	1	1

*Including annual / semester / internal examinations

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

Signature

CATEGORY: II. CO-CURRICULAR, EXTENSION, PROFESSIONAL DEVELOPMENT RELATED ACTIVITIES
II-1 Extension, co-curricular and field based activities:

Year	Assessment Period		Academic Session		Institutional co-curricular activities. (Max. Score 10)	Position held (NCC/NSS/ YDC/SC OUTES) (Max. Score 10)	Extension, co-curricular and field based activities			Annexure No.
	From	To	From	To			Students and staff related socio cultural and sports programme (Max. Score 10)	Community work (Max. Score 10)	API Score 10 (Max. Score 20)	
1										

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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II-2 Contribution to corporate life and management of the department and institution:

Year	Assessment Period		Academic Session		Contribution to Corporate life and management of the department and institution	Role/ Contribution	API Score (Max. Score 15)	Annexure No.
	From	To	From	To				
1	2	3	4	5	6	7	8	9

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

II-3 Professional Development activities (not covered in Category III below):

Year	Assessment Period		Academic Session		Professional Development Activities	API Score (Max. Score 15)	Annexure No.
	From	To	From	To			
1	2	3	4	5	6	7	8

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

CATEGORY (III) - RESEARCH AND ACADEMIC CONTRIBUTIONS
III A (j)- Research Papers published in :-

1. Refereed Journals-

Assessment Years	Title with Page Nos.	Name of Refereed Journals (as mentioned by UGC)	ISSN/ISBN No.	Impact factor, if any	No. of Co-author	Whether you are main author	API Score	Annexure No.
API Score of all A. Y.								

Dist

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III A (ii)- Research Papers published in :-

Non-refereed but recognized and reputable journals and periodicals, having ISBN/ISSN numbers.-.

Assessment Years	Title with Page Nos.	Name of journal	ISSN/ISBN No.	No. of Co-author	Whether you are main author	API Score	Annexure No.
API Score of all A. Y.							

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

A (iii) Full papers in Conference Proceedings (Abstracts not to be included): 10/per publication.

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Assessment Year	Title with year and page nos.	Details of Conference Publication	ISSN/ISBN No.	No. of Co-authors	Whether you are the main author	API Score	Annexure No.
API Score of all A.Y							

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III(B) Research Publications (books, chapters in books, other than refereed journal articles:-

Assessment Year	Mention type of Publication (1 to5)	Title with Page Nos.	ISSN/ ISBN No.	No.of Co-author	Whether you are the Main author	API Score	Annexure No.
API Score of all A.Y							

Nil

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) Research Projects- III (C) (i) Sponsored Projects carried out/ ongoing:

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	API Score	Annexure No.
API Score of all A. Y.						

Nil

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) (ii-iv) Projects

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	Whether major policy document prepared for International/ Central/State/Local bodies or patent/ Technology Transfer/Product/Process as out comes	API Score	Annexure No.	
API Score of All A Y								

016

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (D) RESEARCH GUIDANCE

Assessment Year	Degree	No. of Enrolled	No. of Thesis Submitted	No. of Degree Awarded	API Score	Annexure No.
API Score of All A Y						

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1 2 3 4 5 6 7 8 9 10 11 12

List of enclosures (Please attach, copies of Certificate, Sanction Orders, Papers etc where ever necessary)

Annexure No	Details of copies of certificates, Sanction Orders, Papers etc wherever necessary

nicé

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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ASSESSMENT BY IQAC

Category	Criteria	Total API SCORES OF Assessment Years (As applicable)						Total API Score for Assessment Period	Annual Average API Score for Assessment Period
		Year I	Year II	Year III	Year IV	Year V	Year VI		
I	Teaching, Learning and Evaluation related activities								
II	Co-curricular, Extension, Professional development etc.								
	Total I+II								
III	Research and Academic Contribution								

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-II/84 dated 31/01/2018, We the members of IQAC as enlisted below have checked and verified the API scores awarded above.

DUG

NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personnel file from page no..... to.....

Signature of Principal
With seal & date

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

कार्मिक विभाग की विज्ञापित क्रमांक एफ. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

क्र.सं.	पद	कार्यालय	दिनांक:
---------	----	----------	---------

को एतदघोषणा करता हूँ कि:-
1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्या थी।

क्र.सं.	नाम	जन्म तिथि
1		
2		
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2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या ----- है।

क्र.सं.	नाम	जन्म तिथि
1		
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दिनांक: हस्ताक्षर नाम: पद: विभाग:

नोट : जो लागू नहीं हो, वह काट दें।

मेरे समक्ष हस्ताक्षर किये।

(कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

COMMISSIONERATE COLLEGE EDUCATION RAJASTHAN, JAIPUR
APPLICATION FORM FOR ASSISTANT PROFESSOR (SELECTION SCALE) - (As per 31-01-2018)
Self-Assessment for the Performance Based Appraisal System (PBAS)
Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):			
2	Father's /Mother's /husband's name:			
3	Subject			
4	Current Designation & Grade Pay:			
5	Address for correspondence (With Pin code):			
	Mobile No.:	Email:		
6	(i) No & Date of Appointment order:	Annexure No.	(ii) Date of joining after regular selection:	Annexure No.
7	(iii) Present posting place Post PG Qualifications(In relevant Subject)	Degree	University	Date of Award
		M. Phil.		
		Ph. D.		
8	Details of last CAS Promotions: (Senior scale)			
	Scale	Order No. with date	Date of Promotion(dd/mm/yy)	Annexure No.
	Assistant Professor (Senior Scale)(L-11)			

Duty

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

9	Details of Refresher Courses /Research Methodology Workshops/ Training, Teaching-Learning-Evaluation Technology Programmes/ Soft Skills development Programmes and Faculty Development Programmes of 2/3 week duration.							
	Name of the Course	Sponsoring Agency	Place	No. of Days	From	To	Annexure No.	
10	Details of Extraordinary leaves (EOL) if availed during the assessment period.							
	From	To	Total No of Days	Purpose of EOL	Sanction Order No. & Date	Annexure No.		
11	Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non – Teaching department related with assessment period. (if applicable)							
	University/ Department/ Institute	Post held	Nature of work performed	From	To	Order No. with date	Annexure No.	
12	Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16(17))? Yes/No							
	If yes, mention details and latest status : _____							
	Decision if finalized: _____							
13	Has any adverse entry in any APAR of assessment period marked by the reviewing officer?							
	If yes, mention the year and letter number with date		Number	Date	If yes, Provide details		Annexure No.	
14	Have you filed IPR of this year : _____							
15	Due date of promotion applied for as per fulfilment of eligibility of CAS:				Promotion Post	Eligibility Date		

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I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

PART -B

ACADEMIC PERFORMANCE INDICATORS (A.P.I.)

CATEGORY: 1. TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES

1.1-2 Lectures, seminars, tutorials, practicals, contact hours taken as percentage of lectures allocated, Lectures or other teaching duties in excess of the UGC norms .

Year	Assessment Period		Academic Session		No of classes per week allotted	Total Number of classes		Percentage of classes taken (column 8/ 7x100)	API (Max 50)	API Teaching Load in excess of UGC norm (Max 10)	TOTAL API (Max.60 (10+11))	Annexure No.
	From	To	From	To		As per Documented record (Net of Leave days) *	Actually conducted					
1	2	3	4	5	6	7	8	9	10	11	12	

* Adjusting no of days in which teaching was not done due to leave/ Training/Deputation / Fellowship duly sanctioned by competent authority.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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1.3 Preparation and Imparting of knowledge / instruction as per curriculum; syllabus enrichment by providing additional resources to students.

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Year	Assessment Period		Academic Session		Consulted	Description of Reading / Instructional material	Prescribed	Provided to students	API Score (Max. Score 20)	Annexure No.
	From	To	From	To						
1	2	3	4	5	6		7	8	9	10

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.4 Use of participatory and innovative teaching-learning methodologies; updating of subject content, course improvement etc.

Year	Assessment Period		Academic Session		Use of participatory and innovative teaching-learning methodologies (Max. Score 10)	Short description of	Updating of subject content & Course improvement (Max. Score 10)	API Score (Max. Score 20)	Annexure No.
	From	To	From	To					
1	2	3	4	5	6	7	8	9	

2016

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.5. Examination duties (Invigilation; question paper setting, evaluation/assessment of answer scripts) as per allotment.

Year	Assessment Period		Academic Session		Invigilation Duties * (Max score 10)			Examination duties			API Score (Max score 25)	Annexure No.
	From	To	From	To	Allotted	Performed	Extent to which carried out (%) (7/6x100)	Question paper setting (Max score 5)	Evaluation of answer scripts assessed (Max score 5)	Coordination or flying squad duties (Max score 10)		
1	2	3	4	5	6	7	8		9	10	11	12

*Including annual / semester / internal examinations

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

Date

CATEGORY: II. CO-CURRICULAR, EXTENSION, PROFESSIONAL DEVELOPMENT RELATED ACTIVITIES
II-1 Extension, co-curricular and field based activities:

Year	Assessment Period		Academic Session		Extension, co-curricular and field based activities						Annexure No.
	From	To	From	To	Institutional co-curricular activities. (Max. Score 10)	Position held (NCC/NSS/ YDC/SC OUTES) (Max. Score 10)	Students and staff related socio cultural and sports programme (Max. Score 10)	Community work (Max. Score 10)	APL Score 10 (Max. Score 20)		
1											

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

one

II-2 Contribution to corporate life and management of the department and institution:

Year	Assessment Period		Academic Session		Contribution to Corporate life and management of the department and institution	Role/ Contribution	API Score (Max. Score 15)	Annexure No.
	From	To	From	To				
1	2	3	4	5	6	7	8	9

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

II-3 Professional Development activities (not covered in Category III below):

Year	Assessment Period		Academic Session		Professional Development Activities	APJ Score (Max. Score 15)	Annexure No.
	From	To	From	To			
1	2	3	4	5	6	7	8

or

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

CATEGORY (III) - RESEARCH AND ACADEMIC CONTRIBUTIONS

III A (i) - Research Papers published in :-

1. Refereed Journals-

Assessment Years	Title with Page Nos.	Name of Refereed Journal(as mentioned by UGC)	ISSN/SBN No.	Impact factor, if any	No. of Co-author	Whether you are main author	API Score	Annexure No.
API Score of all A. Y.								

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

21/12

III A (ii)- Research Papers published in :-

Non-refereed but recognized and reputable journals and periodicals, having ISBN/ISSN numbers.-.

Assessment Years	Title with Page Nos.	Name of journal	ISSN/ISBN No.	No. of Co-author	Whether you are main author	API Score	Annexure No.
API Score of all A. Y.							

only

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

A (iii) Full papers in Conference Proceedings (Abstracts not to be included): 10/per publication.

Assessment Year	Title with year and page nos.	Details of Conference Publication	ISSN/ISBN No.	No. of Co-authors	Whether you are the main author	API Score	Annexure No.
API Score of all A.Y							

01/14

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III(B) Research Publications (books, chapters in books, other than refereed journal articles:-

Assessment Year	Mention type of Publication (1 to5)	Title with Page Nos.	ISSN/ ISBN No.	No.of Co-author	Whether you are the Main author	API Score	Annexure No.
API Score of all A.Y							

01/16

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) Research Projects - III (C) (i) Sponsored Projects carried out/ ongoing:

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	API Score	Annexure No.
API Score of all A. Y.						

over:

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) (ii-iv) Projects

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	Whether major policy document prepared for International/ Central/State/Local bodies or patent/ Technology Transfer/Product/Process as out comes	API Score	Annexure No.	
API Score of All A Y								

only

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (D) RESEARCH GUIDANCE

Assessment Year	Degree	No. of Enrolled	No. of Thesis Submitted	No. of Degree Awarded	API Score	Annexure No.
API Score of All A Y						

divd

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (E) (i) TRAINING COURSES AND CONFERENCE /SEMINAR/WORKSHOP PAPERS

Assessment Year	Programme	Duration	Organised by	API Score	Annexure No.
API Score of all A.Y					

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

DATE

III (E) (ii) Papers in Conferences/ Seminars/ workshops etc.**

Assessment Year	Title of Paper Presented	Title of Conference / Seminar	Organised by	Whether international /national/state /regional/college or University	API Score	Annexure No.

Date

**If a paper presented in Conference/Seminar is published in the form of Proceedings, the points would accrue for the publication (III (a)) and not under presentation (III (e)(ii)).

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III E (iii) Invited Lectures and Chairmanships at National or International Conference / Seminar etc.

Assessment Year	Title of Lecture/Academic Session	Title of conference / Seminar etc.	Organised by	Whether International / National	API Score	Annexure No.
API Score of all A.Y						

gudu

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

List of enclosures (Please attach, copies of Certificate, Sanction Orders, Papers etc .where ever necessary)

. Annexure No	Details of copies of certificates, Sanction Orders, Papers etc wherever necessary

give

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

ASSESSMENT BY IQAC

Category	Criteria	Total API SCORES OF Assessment Years (As applicable)						Total- API Score for Assessment Period	Annual Average API Score for Assessment Period
		Year I	II	III	IV	V	VI		
I	Teaching, Learning and Evaluation related activities								
II	Co-curricular, Extension, Professional development etc.								
	Total I+II								
III	Research and Academic Contribution								

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-II/84 dated 31/01/2018, We the members of IQAC as enlisted below have checked and verified the API scores awarded above.

NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personnel file from page no..... to.....

Signature of Principal
With seal & date

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

कार्मिक विभाग की शिक्षिति क्रमांक एक. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

मैं	पद	कार्यालय	दिनांक:
-----	----	----------	---------

को एतद्घोषणा करता हूँ कि:-

1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्याथी।

क्र. सं.	नाम	जन्म तिथि
1		
2		
3		
4		

2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या -----है।

क्र. सं.	नाम	जन्म तिथि
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दिनांक: हस्ताक्षर नाम: पद: विभाग:

नोट: जो लागू नहीं हो, वह काट दें।

मेरे सम्मक्ष हस्ताक्षर किये।

(कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date

COMMISSIONERATE COLLEGE EDUCATION RAJASTHAN, JAIPUR
APPLICATION FORM FOR ASSOCIATE PROFESSOR (PAY BAND IV) - (As per 31-01-2018)
 Self-Assessment for the Performance Based Appraisal System (PBAS)
 Assessment Period from to
PART A : GENERAL INFORMATION AND ACADEMIC DETAILS

1	Name (In Block Letters):		
2	Father's /Mother's /Husband's name:		
3	Subject		
4	Current Designation & Grade Pay:		
5	Address for correspondence (With Pincode):		
	Mobile No.:		
	Email:		
6	(i) No & Date of Appointment order:	Annexure No.	(ii) Date of joining after regular selection:
	(iii) Present posting place		
7	Post PG Qualifications(In relevant Subject)		
	Degree	University	Date of Award
	M. Phil.		
	Ph. D.		
8	Details of last CAS Promotions: (Senior scale)		
	Scale	Order No. with date	Date of Promotion(dd/mm/yy)
	Assistant Professor (Selection Scale)(L-12)		

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

9	Details of Refresher Courses /Research Methodology Workshops/ Training, Teaching-Learning-Evaluation Technology Programmes/ Soft Skills development Programmes and Faculty Development Programme of minimum one week duration									
	Name of the Course	Sponsoring Agency			Place	No. of Days	From	To	Annexure No.	
10	Details of Extraordinary leaves (EOL) if availed during the assessment period.									
	From	To	Total No of Days	Purpose of EOL			Sanction Order No. & Date		Annexure No.	
11	Details of Teacher Research Fellowship/Post- Doctoral Fellowship/ Deputation at Non – Teaching department related with assessment period. (if applicable)									
	University/ Department/ Institute	Post held	Nature of work performed	From	To	Order No. with date		Annexure No.		
12	Is any departmental enquiry pending/ finalized against the applicant under CCA rules (section 16/17)?									
	If yes, mention details and latest status :								Yes/No	Annexure No.
13	Has any adverse entry in any APAR of assessment period marked by the reviewing officer?									
	If yes, mention the year and letter number with date				Number	Date		If yes, Provide details		Annexure No.
14	Have you filled JPR of this year :									
15	Due date of promotion applied for as per fulfilment of eligibility of CAS:									
	Promotion Post					Eligibility Date				

duke

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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PART-B

**ACADEMIC PERFORMANCE INDICATORS (A.P.I.)
CATEGORY: 1. TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES**

1.1-2 Lectures, seminars, tutorials, practicals, contact hours taken as percentage of lectures allocated, Lectures or other teaching duties in excess of the UGC norms .

Year	Assessment Period		Academic Session		No of classes per week allotted	Total Number of classes		Percentage of classes taken (column 8/ 7x100)	A.P.I (Max 50)	A.P.I Teaching Load in excess of UGC norm (Max 10)	TOTAL A.P.I (Max:60) (10+11)	Annexure No.
	From	To	From	To		As per Documented record (Net of Leave days) *	Actually conducted					
1	2	3	4	5	6	7	8	9	10	11	12	

dukk

* Adjusting no of days in which teaching was not done due to leave/ Training/Deputation / Fellowship duly sanctioned by competent authority.

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

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1.3 Preparation and Imparting of knowledge / instruction as per curriculum; syllabus enrichment by providing additional resources to students.

Year	Assessment Period		Academic Session		Consulted	Description of Reading / Instructional material	Prescribed	Provided to students	API Score (Max. Score :20)	Annexure No.
	From	To	From	To						
1	2	3	4	5	6	7	8	9	10	

and

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.4 Use of participatory and innovative teaching-learning methodologies; updating of subject content, course improvement etc.

Year	Assessment Period		Academic Session		Use of participatory and innovative teaching-learning methodologies (Max. Score 10)	Short description of	Updating of subject content & Course improvement (Max. Score 10)	API Score (Max. Score 20)	Annexure No.
	From	To	From	To					
1	2	3	4	5	6		7	8	9

one

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

1.5. Examination duties (Invigilation; question paper setting, evaluation/assessment of answer scripts) as per allotment.

Year	Assessment Period		Academic Session		Invigilation Duties * (Max score 10)			Extent to which carried out (%)(7/6x100)	Question paper setting (Max score 5)	Examination duties		AP1 Score (Max score 25)	Annexure No.
	From	To	From	To	Allotted	Performed	n of answer scripts assessed (Max scores)			Coordination or flying squad duties (Max score 10)			
1	2	3	4	5	6	7	8		9	10	11	12	

*Including annual / semester / internal examinations

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

ORISE

CATEGORY: II. CO-CURRICULAR, EXTENSION, PROFESSIONAL DEVELOPMENT RELATED ACTIVITIES
II-1 Extension, co-curricular and field based activities:

Year	Assessment Period		Academic Session		Extension, co-curricular and field based activities						Annexure No.
	From	To	From	To	Institutional co-curricular activities. (Max. Score 10)	Position held (NCC/NSS/ YDC/SC OUTES) (Max. Score 10)	Students and staff related socio cultural and sports programme (Max. Score 10)	Community work (Max. Score 10)	API Score 10 (Max. Score 20)		
1											

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

div

II-2 Contribution to corporate life and management of the department and institution:

Year	Assessment Period		Academic Session		Contribution to Corporate life and management of the department and institution	Describe responsibilities borne by you	Role/ Contribution	API Score (Max. Score 15)	Annexure No.
	From	To	From	To					
1	2	3	4	5			7	8	9

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

II-3 Professional Development activities (not covered in Category III below):

Year	Assessment Period		Academic Session		Professional Development Activities	API Score (Max. Score 15)	Annexure No.
	From	To	From	To			
1	2	3	4	5	6	7	8

blank

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

CATEGORY (III) - RESEARCH AND ACADEMIC CONTRIBUTIONS

III A (i) - Research Papers published in :-

1. Refereed Journals-

Assessment Years	Title with Page Nos.	Name of Refereed Journal(as mentioned by UGC)	ISSN/ISBN No.	Impact factor, if any	No. of Co-author	Whether you are main author	API Score	Annexure No.
API Score of all A. Y.								

0112

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III A (ii)- Research Papers published in :-

Non-refered but recognized and reputable journals and periodicals, having ISBN/ISSN numbers.-.

Assessment Years	Title with Page Nos.	Name of journal	ISSN/ISBN No.	No. of Co-author	Whether you are main author	API Score	Annexure. No.
API Score of all A. Y.							

Blank

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

A (iii) Full papers in Conference Proceedings (Abstracts not to be included): 10/per publication.

Assessment Year	Title with year and page nos.	Details of Conference Publication	ISSN/ISBN No.	No. of Co-authors	Whether you are the main author	API Score	Annexure No.
API Score of all A.Y							

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III(B) Research Publications (books, chapters in books, other than refereed journal articles:-

Assessment Year	Mention type of Publication (1 to 5)	Title with Page Nos.	ISSN/ ISBN No.	No. of Co-author	Whether you are the Main author	API Score	Annexure No.
API Score of all A.Y							

01/16/2

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) Research Projects- III (C) (i) Sponsored Projects carried out/ ongoing:

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	API Score	Annexure No.
API Score of all A. Y.						

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (C) (ii-iv) Projects

Assessment Year	Title	Agency	Period	Grant/Amount Mobilized (Rs- Lakh)	Whether major policy document prepared for International/ Central/State/Local bodies or patent/ Technology Transfer/Product/Process as out comes	API Score	Annexure No.
API Score of All A Y							

over

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (D) RESEARCH GUIDANCE

Assessment Year	Degree	No. of Enrolled	No. of Thesis Submitted	No. of Degree Awarded	API Score	Annexure No.
API Score of All A Y						

give

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

III (E) (i) TRAINING COURSES AND CONFERENCE /SEMINAR/WORKSHOP PAPERS

Assessment Year	Programme	Duration	Organised by	API Score	Annexure No.
API Score of all A.Y					

0114

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

ASSESSMENT BY IQAC

Category	Criteria	Total API SCORES OF Assessment Years (As applicable)						Total- API Score for Assessment Period	Annual Average API Score for Assessment Period
		Year I Session	II	III	IV	V	VI		
I	Teaching, Learning and Evaluation related activities								
II	Co-curricular, Extension, Professional development etc.								
	Total I-II								
III	Research and Academic Contribution								

This is to certify that on the basis of the Government of Rajasthan, Department of Personnel Notification No. F.1(6)DOP/A-II/84 dated 31/01/2018, We the members of IQAC as enlisted below have checked and verified the API scores awarded above.

NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE	NAME OF ASSISTANT / ASSOCIATE PROFESSOR	SUBJECT	SIGNATURE

On the basis of office record information filled above is correct and verified. It is also certified that a copy of this application including all annexures is kept in applicants personnel file from page no..... to.....

Signature of Principal
With seal & date

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

over

INFORMATION OF PUBLICATIONS ONLY FOR ASSOCIATE PROFESSOR (PB IV) (L-13A)
For Associate Professor : Details of publications during entire service period after regular selection

S.no	Year and date of publication	Type of publication	Title of Publication	Annexure No.
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				

List of enclosures (Please attach, copies of Certificate, Sanction Orders, Papers etc .where ever necessary)

Annexure No	Details of copies of certificates, Sanction Orders, Papers elsewhere necessary

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required

one

कार्मिक विभाग की विशिष्ट क्रमांक एफ. 7 (1) डी.ओ.पी.क-2/95
दिनांक 20-06-2001 के क्रम में अधिकारी द्वारा दी जाने वाली घोषणा

मैं	पद	कार्यालय	दिनांक:
-----	----	----------	---------

को एतदघोषणा करता हूँ कि:-

1. दिनांक 31.05.2002 तक मेरे बच्चों (पुत्र एवं पुत्री) की संख्या थी।

क्र.सं.	नाम	जन्म तिथि
1		
2		
3		
4		

2. दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि नहीं हुई है। या
दिनांक 01 जून, 2002 को एवं इसके पश्चात मेरे बच्चों की संख्या में वृद्धि हुई है एवं वर्तमान में बच्चों (पुत्र एवं पुत्री) की संख्या है।

क्र.सं.	नाम	जन्म तिथि
1		
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दिनांक: हस्ताक्षर नाम: पद: विभाग:

नोट : जो लागू नहीं हो, वह काट दें।

मेरे समक्ष हस्ताक्षर किये।

(कार्यालयाध्यक्ष के हस्ताक्षर मय मोहर एवं दिनांक)

I declare that information provided by me is true to the best of my knowledge and documentary evidence for each information will be produced as and when required
Signature of Applicant with Date