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**Mahatma Gandhi University**  
Priyadarsini Hills P.O., Kottayam – 686 560, Kerala  
Tel. 0481 – 2731020, 2733281. Web : [www.mgu.ac.in](http://www.mgu.ac.in)

No.235/A II/3/2018/Admn

Dated:11.09.2018

**CORRIGENDUM II**

**APPLICATION FOR THE POST OF REGISTRAR & CONTROLLER OF EXAMINATIONS**

- Ref: 1. Notification No. 235/ A II (3)/2018/Admn, dated: 18.07.2018  
2. Corrigendum No. 235/ A II (3)/2018/Admn, dated: 03.09.2018

As per reference cited above, University had invited application in online mode from qualified candidates for appointment as Registrar and Controller of Examinations in Mahatma Gandhi University. It is prescribed in the notification that Academic qualifications, age and experience are relaxable in the case of candidates otherwise highly qualified. Hence it is hereby notified that the candidates claiming relaxation in the academic qualifications, age and experience shall remit fee in online mode in the head of account "Miscellaneous - Application fee for Registrar/CE" available in the e- payment portal of University website and submit application in offline mode in the prescribed proforma attached herewith (4 sets) using additional sheets if necessary including supporting documents. Duly filled application should reach this office on or before 08.10.2018.

A handwritten signature in black ink, appearing to be the name of the Registrar, written over the printed name.

**REGISTRAR**

**Enclosure: Application form**

**MAHATMA GANDHI UNIVERSITY**

**APPLICATION FOR THE POST OF REGISTRAR/CONTROLLER OF EXAMINATIONS**

Application No :

Post applied for :

Name of the Applicant :

Gender :

Father's Name :

Mother's Name :

Mobile Number :

Alternate Telephone Number :

Email Address :

Marital Status :

Nationality :

State :

Religion :

Caste :

Address for Communication

House Name/NO :

Place :

Post Office :

Pincode :

District :

**Permanent Address**

House Name/NO :

Place :

Post Office :

Pincode :

District :

**Educational Qualifications**

Degree	Mode	Name of Degree	University	Subject	Year of Passing	Percentage

**Teaching Experience Details**

Name of Employer	Status of Institute	Mode	Designation	Period of Employment		Pay band/scale and Grade Pay	
				From	To	Scale Band	Grade pay

**Administrative Experience**

Name of Employer	Status of Institute	Mode	Designation	Period of Employment		Pay band/scale and Grade Pay	
				From	To	Scale Band	Grade pay


## Research Publication

### (a) Publication other than Journals

Text/Reference: T-Text,R-Reference; Author Type:C-Co-Author,S-Sole Author; Publisher Type:I-International,N-National,O-Other Local

Sl. No	Title of book	Publisher Name	Text/Reference	Author Type	No of chapters	Journal Type	Publisher Type	Month & Year of Publication	ISBN No

### (b) Research papers published in refereed journals as notified by UGC

Sl. No	Title	Name of journal	Publisher of the journal with City and Country	Status of Author	Month & year of publication	Whether Refereed	Volume No.and Page numbers	Level	Impact Factor	Name of agency providin Impact Factor

### Other Information

a) Contribution to educational innovation, design of new curricular and courses, and technology-mediated teaching process.

b) Membership/Fellowship of other institutions/professional societies

c) Other activities/Responsibilities:(Academic/Administrative)

d) Any other relevant information, if not given above

e) Have you been punished during your service, if any, on Gender related/Caste discrimination issues etc. or convicted by a Court of Law. If so, give details.

f) Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? If yes, give details in a separate sheet

g) Do you have any case pending against you in any court of law? If yes, give details.

h) Are you willing to accept the minimum initial pay in the grade? If not, state reasons for claiming higher starting pay.

i) If selected for appointment, what notice would you require for joining the post?

j) Names and Addresses of Two Referees:

### List of Enclosures

### DECLARATION

I hereby declare that the information given by me in the Application is true, complete and correct to the best of my knowledge and belief and that nothing has been concealed or distorted thereof. If at any stage, I am found to have concealed/distorted any information or given any false statement, my application/appointment shall be liable to be summarily rejected/terminated without notice or compensation.

Place:

Date:

Signature of the Candidate

Name