

University of Mumbai



URGENT/ BY HAND/ MAIL/WEB

APPOINTMENT UNIT,
EXAMINATION SECTION,
VIDYANAGARI, KALINA,
SANTACRUZ (EAST),
MUMBAI - 400 098.

Tel : 26526204 / 26543416

No. Exam./ APP/ 4954 / of 2016.

CIRCULAR :-


The Directors of the Institutes / Heads of University Departments/ Principals of the affiliated colleges / Principal, Sir. J. J. College of Architecture, Heads of the recognized Institutions, The Librarian and Professor cum-Director, Institution of Distance & Open Learning are hereby informed that, in order to keep the up-to-date information of persons suitable for appointment as PAPER-SETTERS/ MODERATORS/ EXAMINERS at the various University Examinations in the various Faculties for the examinations to be held in the every academics year, it is necessary that the University should have the information of the teachers from their respective colleges who have taught various subjects and become eligible for appointment as Paper-setters, Moderators, Examiners for the examinations conducted by the University.

They are therefore, requested to furnish the information of the teachers in the **Excel format only** (Proforma is enclosed) and **send it on the email address** (as per the faculty wise given bellow) with hard copy of the same to the Assistant Registrar, Appointment Unit, Room No. 51, 2nd Floor, Examination Section, M. J. Phule Bhavan, Vidyanagari, Santacruz (E), Mumbai - 400 098 by **20th June, 2016.**

| SR. NO. | FACULTY | EMAIL ADDRESS |
|---------|--|--|
| 1. | Arts | appointmentunit_arts@exam.mu.ac.in |
| 2. | Commerce | appointmentunit_commerce@exam.mu.ac.in |
| 3. | Science | appointmentunit_science@exam.mu.ac.in |
| 4. | Law | appointmentunit_law@exam.mu.ac.in |
| 5. | Fine Arts | appointmentunit_finearts@exam.mu.ac.in |
| 6. | Management | appointmentunit_mgmt@exam.mu.ac.in |
| 7. | Technology (Engineering) | appointmentunit_engg@exam.mu.ac.in |
| 8. | Technology (MCA, Architecture, Pharmacy) | appointmentunit_tech@exam.mu.ac.in |

[**Note:** Please do not send scan copy, handwritten copy etc.]

Mumbai - 400 098.
31st May, 2016.


DEEPAK WASAVE
(Offg. CONTROLLER OF EXAMINATIONS)
(UNIVERSITY OF MUMBAI)

To,

The Directors of the Institutes / Heads of University Departments/ Principals of the affiliated colleges / Principal, Sir. J. J. College of Architecture, Heads of the recognized Institutions, The Librarian and Professor cum-Director, Institution of Distance & Open Learning, University of Mumbai.

P. T. O.

TEACHERS INFORMATION FORMAT

Name of the College/Institute : _____

College Contact No: _____

Address of the College/Institute : _____

E-Mail ID Of College: _____

| Sr. No. | Faculty | Name of the Teacher (Beginning with Surname) | Residential Address | Mobile No. | Residential No. | E-mail ID of Teacher | Exam/ Course | Part / Semester | Name of the Subject | Full Time Part Time Visiting | Toal Exp. | Sub. Exp. | Approval Status with subject |
|---------|---------|--|---------------------|------------|-----------------|----------------------|--------------|-----------------|---------------------|------------------------------|-----------|-----------|------------------------------|
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Date: _____ College Seal : _____

Name of College Principal : _____

Signature : _____

- * If a teacher teaches more than one subject then please mention his/her name separately for each subject.
- * Please mention subjects as per syllabus.
- * Please send the soft copy (by email) in excel formate only on the respective email-id of the faculty.
- * Please don't send the scanned copy/ scanned copies are not accepted.