

University of Mumbai



No. EL/ICD/2018-19/191/2018

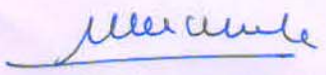
31st May, 2018.

NOTIFICATION

This is to notify that the CVs and information in prescribed format A, B & C are invited from the Principals, Professors and Heads of the Recognized Institutes for nomination on the Academic Council by the Hon'ble Vice-Chancellor, University of Mumbai, Mumbai in consultation with the Hon'ble Chancellor as per the provisions made under Section 32(3)(f)(i)(ii)(iii) of the Maharashtra Public Universities Act, 2016.

- i) Principals (Eight)
- ii) Professors (Two)
- iii) Head of the Recognized Institutions (One)

They are requested to submit their CVs in two pages only in respective prescribed format duly forwarded by the competent authority to the Registrar, University of Mumbai, Mumbai on or before 7th June 2018 on Email ID arelection@election.mu.ac.in


(Dr. Dinesh Kamble)
Registrar (I/c.)

Encl. Format : Bio-Data

- A. Principal
- B. Professor – Revised format dated 05/06/2018
- C. Head of the Recognized Institution - Revised format dated 05/06/2018

CV

1. Full name of the applicant (in capital letters),
With initials expanded, as in official records :-
2. Faculty applied for :-
3. Sex (Male/Female) :-
4. Date of Birth (Day-Month-Year) :-
5. Age as on 31/8/2017 :-
6. a) Present Post :-
b) Designation and grade :-
c) Date from which held :-
d) Name of the organization :-
7. Address for communications :-
8. Contact details :-
a) Mobile Number :
b) E-mail IDs :
9. Date of Award of Doctorate Degree * :-
10. Service Experience in Years (Cadre wise) :-
i) Assistant Professor :
ii) Associate Professor :
iii) Professor :
iv) Principal :
11. Number of Students Guided for Research :-
a) M.Phil :
b) Doctorate degree :
c) Post Doctoral :

12. Number of Research Papers published :-
- Peer reviewed journals :
 - i) State Journals :
 - ii) National Journals :
 - iii) International Journals :
13. Number of Books published :-
- a) National Publisher :
 - b) International Publisher :
14. Projects completed/on going with outlay :-
15. No. of Conferences/Seminars/Workshops organized :-
- a) State :
 - b) National :
 - c) International :
16. No. of Conferences/Seminars/Workshops attended :-
- a) State :
 - b) National :
 - c) International :
17. Worked on various authorities & bodies of the University :-
18. Awards received
19. Participation in co-curricular/Extra curricular activities :-
20. Patents if any
21. Additional if any

Date :

Place :

Signature

University of Mumbai



Proforma 'A'
Principal

Subject : Submission of name & other required information for nomination on Academic Council by the Hon'ble Vice –Chancellor under the provision of Maharashtra Public Universities Act, 2016 section 32(3)(f)

Full Name : _____

(In Block Letters)

(Surname First)

Residential Address : _____

Pin code : _____

Date of Birth : _____ Name of Category : _____

Educational Qualification : _____

Name of the College with address : _____

Date of Joining (As Teacher) : _____

Date of Joining (As Principal) : _____

University approval letter number & date

(As Teacher) : _____

University approval letter number & date

(As Principal) : _____

Phone Number : (Office) _____ (Residential) _____

Mobile Number : _____

Email ID : _____

I, hereby certify that, I have not incurred any of the disqualification mentioned u/s 64 of the Maharashtra Public Universities Act, 2016.

I, hereby declare that, the information furnished in this Proforma is true and correct to the best of my knowledge and belief. In case any information given by me is found to be incorrect or false, my request shall be liable to be rejected.

Enclosure: Self Attested copy
Of required documents.

Your faithfully

Signature of the Principal
With seal of College

Forwarded

Signature & Seal of
Chairman/Secretary of the
College Management

University of Mumbai



Proforma 'B'
Professor

Subject : Submission of name & other required information for nomination on Academic Council by the Hon'ble Vice –Chancellor under the provision of Maharashtra Public universities Act, 2016 section 32(3)(f)

Full Name : _____
(In Block Letters)
(Surname First)

Residential Address : _____

Pin code : _____

Date of Birth : _____ Name of Category : _____

Educational Qualification : _____

Subject : _____ Faculty: _____

Name of the College with address : _____

Date of Joining (As Teacher) : _____

Date of Joining (As Professor) : _____

University approval/appointment letter number & date
(As Teacher) : _____

University approval/appointment letter number & date
(As Professor) : _____

Phone Number : (Office) _____ (Residential) _____

Mobile Number : _____

Email ID : _____

I, hereby certify that, I have not incurred any of the disqualification mentioned u/s 64 of the Maharashtra Public Universities Act, 2016.

I, hereby declare that, the information furnished in this Proforma is true and correct to the best of my knowledge and belief. In case any information given by me is found to be incorrect or false, my request shall be liable to be rejected.

Enclosure: Self Attested copy
of required documents.

Your faithfully

Signature of the Professor

Forwarded

Signature & Seal of
Registrar/HOD/Director/
Principal

University of Mumbai



Proforma 'C' Head of Recognized Institute

Subject : Submission of name & other required information for nomination on Academic Council by the Hon'ble Vice-Chancellor under the provision of Maharashtra Public universities Act, 2016 section 32(3)(f)

Full Name : _____
(In Block Letters)
(Surname First)

Residential Address : _____

Pin code : _____

Date of Birth : _____ Name of Category : _____

Educational Qualification : _____

Subject : _____ Faculty: _____

Name of the College with address : _____

Date of Joining (As Teacher) : _____

Date of Joining (As Head of Recognized Institute) : _____

University approval letter number & date

(As Teacher) : _____

University approval letter number & date

(As Head of Recognized Institute) : _____

Phone Number : (Office) _____ (Residential) _____

Mobile Number : _____

Email ID : _____

I, hereby certify that, I have not incurred any of the disqualification mentioned u/s 64 of the Maharashtra Public Universities Act, 2016.

I, hereby declare that, the information furnished in this Proforma is true and correct to the best of my knowledge and belief. In case any information given by me is found to be incorrect or false, my request shall be liable to be rejected.

Enclosure: Self Attested copy
Of required documents.

Your faithfully

Signature of the Head
With seal

Forwarded

Signature & Seal of
Director/Head of the Institution/
Secretary of the Trust/Society