



MHRD-Teaching Learning Centre (TLC) UNIVERSITY OF CALICUT

Calicut University. P.O, 673 635, Kerala.

(Established under PMMMNMTT Scheme, MHRD, Govt. of India)

Application form for Admission to

☐ INDUCTION TRAINING PROGRAMME

From To

☐ SHORT RUN COURSE in (Subject).....

From..... To

☐ MID RUN COURSE for

From To

I. PERSONAL INFORMATION:

1. Name (in Block letters)

2. Date of Birth

Date	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Sex ☐ Male ☐ Female

4. Educational Qualifications

5. Community ☐ SC ☐ ST ☐ OBC ☐ Others

6. Mailing Address
(For correspondence
regarding this
application form)

House/Flat No	
Locality	
Town	
District	
State	
Pin code	
Phone (with code)	
Mobile No	
email	

7. Residential Address

.....

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II. DETAILS OF EMPLOYMENT:

1. Designation

2. Department

3. Basic Pay & Scale of pay

4. Address of College/University

Pin Code: Phone:

5. Name of Affiliating University.....

III. DETAILS OF TEACHING EXPERIENCE:

1. Date of First Appointment Date Month Year
2. Date of Regular Appointment
3. Status of Appointment Permanent Temporary Ad-hoc
4. Date of next promotion due..... ☐ ☐ ☐

IV. DETAILS OF COURSES ATTENDED:

Course	Institution	Period	
		From	To
Orientation/Induction Programme			
Refresher Courses			
Short Run Course			

V. Whether accommodation in the University Campus is required Yes/No.....

Place:

Date :

Signature of the Applicant

CERTIFICATE OF RECOMMENDATION FROM THE HEAD OF THE INSTITUTION

Certified that Dr./Mr./Ms. is working as (designation) in permanent/temporary/ad-hoc (Full time/Part time) basis and that the details furnished above by the applicant are true and correct. He/She will be relieved of from this institution for the duration of the course, if selected. Certified also that this institution is entitled to receive UGC grant under section 12(B)2(f) of the UGC Act.

Place:

Date:

Office Seal

Principal/Registrar

For office use only

Selected for IP/SR/MR
beginning on joined on

Assistant

Section Officer

Director