



UNIVERSITY OF VETERINARY & ANIMAL SCIENCES, LAHORE

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APPLICATION AND BIODATA FORM FOR ACADEMIC POSITIONS

LAHORE

i). This form must be duly completed and accompanied by:

- (a) Original Crossed Bank Draft / Pay Order of Rs.500/- (Non-refundable) drawn in favour of the Treasurer, University of Veterinary & Animal Sciences, Lahore.
- (b) Postal Orders will not be accepted.
- (c) All the entries / replies in the Form must be hand written.
- (d) Attested copies of the relevant certificates and testimonials.
- (e) Annexure-wise detail of scientific research publications (National & International), technical reports, conference presentations, postgraduate students supervised, research projects won etc.
- (f) A recent passport size photograph.

PHOTOGRAPH

- ii). Persons already in employment should submit their applications through proper channel, before or on the last date for receipt of applications during office hours.
- iii). Incomplete Applications or those received after the due date will not be entertained.
- iv). The University reserves the right not to fill any vacancy without assigning any reason or consider a person for appointment in a lower cadre against the post advertised.
- v). Applications complete in all respects are required in quadruplicate for the posts of Professors / Associate Professors and in triplicate for the posts of Assistant Professors / Lecturers.
- vi). Additional information (if any) where space is insufficient in the Form may be attached as Annexure.
- vii). Please answer each question clearly and completely. The application must be signed by the applicant.
- viii). Concealment of facts or misquoting of information in the form will disqualify the applicant even after appointment.

1. Post applied for: _____ on BPS / TTS (Mention Clearly) _____

2. Department / Discipline _____

3. Advertisement Date: _____ Newspaper wherein published: _____

4. Full Name (In Block Letters as mentioned in CNIC): _____

5. Father's Name (In Block Letters as mentioned in CNIC): _____

6. Marital Status _____ Male / Female _____

7. Computerized National Identity Card No. _____

8. PVMC Registration No. _____ Status: Active/Expired: _____

If Active (Life time OR Interim): from _____ to _____

9. (i) Postal Address for Interview call / correspondence: _____

(Please also give Tel: Nos.(Landline / Cellular) & E-mail address)

Landline No. _____ Cell No. _____ Email: _____

(ii) Permanent Home Address: _____

(Please also give Tel: Nos.(Landline / Cellular) & E-mail address)

Landline No. _____ Cell No. _____ Email: _____

10. Religion: _____ Date of Birth: _____ Age: _____

(As recorded in the Matriculation Certificate)

(On closing date for receipt of applications)

11. Nationality of (a) Self _____ (b) Wife or Husband, if married: _____

12. EDUCATIONAL QUALIFICATIONS: (In Chronological Order)

(a) Secondary School and Intermediate or Equivalent Examinations.

Institutions Attended	Certificate Obtained	Years Attended		Passing Year	Marks obtained / Total Marks	Div	% Age	Major Subjects
		From	To					

(b) University Education:

Name and Place of Institution	Degrees Obtained	Years Attended		Passing Year	Marks obtained / Total Marks & CGPA	Division	% Age	Major Subjects
		From	To					

(c) Other Formal Training Education:

Name and place of Institution	Leaving Certificate OR Diploma obtained	Years Attended		Major Subjects
		From	To	

(d) Academic Distinction:

Name and place of School, College and University /Institution	Certificate / Degrees obtained	Years attended		Distinction Certificate / Medal	Major Subjects
		From	To		

(e) Distinction in Games and Sports:

13. RESEARCH: Give particulars of all post-graduate and independent research done, giving the name of the institution and the professor under whom research was completed.

14. Give a list of all research papers published in scientific journals and attach originals or reprints.

Topic of the Papers	Name of the Journal	Date of Publication

15. PUBLICATIONS: Give a list of all significant publications and attach originals or reprints, together with any reviews.

16. Summary of Teaching / Research, Service Experience and Publications:

Sr. No.	Factors	No. Only
1.	Experience:	
	Total Years, Months & Days	
2.	Field of Specialization:	
3.	Publications: (HEC Approved)	
	i. International Research Papers	
	a) with impact factor	
	b) without impact factor	
	ii. National Research Papers	
	a) with impact factor	
	b) without impact factor	
	iii. Research Reports	
	iv. Conference presentations	
	v. Other publications	
4.	Students Supervised:	
	i. Ph.D students supervised	
	ii. M.Phil students supervised	
	iii. Membership of Supervisory Committees	
	a) Ph.D	
	b) M.Phil	
5.	Research Projects Won	
	i. From International Agencies	
	ii. From Local / Indigenous Agencies	
	iii. From own Organization	
6.	Professional Services rendered:	
7.	Total Impact Factor	
8.	Membership of Learned Societies	
9.	Formal Trainings	

17. MODERN LANGUAGES: List all the languages in which you are proficient.

Language	Extent of proficiency	Diploma obtained	Year of passing	Institution attended

18. Give particulars of **whole-time** employment **since completion of your education**:

Post held	Where Employed	Federal or Provincial Govt. / Autonomous or Private	Permanent / Temporary / Adhoc	BPS	Monthly Salary	Duration Give Exact Dates:		Cause of leaving	Brief Description
						From	To		

(i) What is the total length of your teaching experience as

(A) Lecturer: _____

(ii) What is the total length of your research experience as

(B) Assistant Professor: _____

(C) Associate Professor: _____

(iii) What is the total length of your administrative experience as

(D) Professor: _____

(E) Other Than Above _____

Note: Experience Certificate mentioning specific dates duly signed / issued by the Competent Officer/Authority of the concerned Department should be attached otherwise the claimed experience will not be accepted.

19. Membership of learned societies: (Give the name of society and nature of membership or office held).

20. Countries visited:

Country	Duration		Purpose of Visit
	From	To	
<p>21. Do you possess all the qualifications mentioned in the advertisement if yes, summarize them briefly in the opposite column mentioning each qualification separately in term of the advertisement.</p> <p>If you do not possess all or some of the qualifications, state briefly but clearly which qualification/qualifications you do not possess, giving your reason why should be considered for the post in spite of this deficiency. (In your own interest you should give clear reasons in support of your claim for the post. Vague replies will hinder the Correct appraisal of your application).</p>			<p>Mention below the qualification you possess</p> <p>(1)</p> <p>(2)</p> <p>(3)</p> <p>(4)</p> <p>(5)</p> <p>Mention below the qualification you do not possess</p> <p>(1)</p> <p>(2)</p> <p>(3)</p>

22. Are you suffering or have you suffered from any physical disability? If so what and when did it begin? _____

23. If you are under liability to repay money to any institution or person, state the Particulars: _____

24. Have you obtained and attached the explicit permission (**Departmental NOC**) from your present employer to apply for this post? _____

25. Give the name, designation of your employer / employers whom we should write for your Confidential Record:

26. If appointed what notice you required before joining the post: _____

27. Were you ever dismissed from service in the past, or were your services ever terminated? If yes, give details:-

28. Give a list of all documents attached with the application:

29. Give the detail of Bank Draft / Pay Order, with Issuing Authority:


Sr. No.	Number	Date	Issuing Authority

D E C L A R A T I O N

I hereby solemnly declare that all the facts / information provided by me in this application form are true to the best of my knowledge and belief. I fully understand that aforementioned facts will serve the basis for determination of my eligibility and my appointment will be liable to termination, if facts / entries were found incorrect.

Date _____

Signature of Applicant

 Received application of _____ S/o D/o _____ for the post of _____ in the discipline / department _____ on _____ at _____.

Signature of Recipient