



## **NOTICE**

The University intends to start B. Pharmacy Programme from the Academic Session 2023-24 subject to the approval from the Pharmacy Council of India. Four Part Time Teachers are required to teach various courses of B. Pharmacy. Interested applicants may send their application form in the prescribed proforma alongwith documents in one PDF upto 03.07.2023 through email of Establishment Branch i.e. [esttbrt@cdlu.ac.in](mailto:esttbrt@cdlu.ac.in). Qualifications of the candidate should be as per Pharmacy Council of India regulations 2014. Part Time Teachers (in case of Ph.D.) will be paid remuneration @ Rs. 750/- per lecture subject to a maximum of Rs. 35,000/- per month. However, the Part Time Teachers (other than above) shall be paid @ Rs. 750/- per lecture subject to maximum limit of Rs. 30,000/- per month.

**Date of Interview: 05.07.2023 at 11:00 A.M. onwards in the O/o Dean, Academic Affairs**

The number of requirement of Part Time Teacher can be **increased or decreased** as per the requirement of the Department of Pharmacy.

No T.A/ D.A will be paid to the candidates for attending the interview.

**-sd-  
REGISTRAR**



Application form for the engagement of Part Time Teacher in the Department of \_\_\_\_\_ for Academic Session 2023-24.

1. Name: \_\_\_\_\_
2. Father's name: \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_
4. Correspondence add. \_\_\_\_\_  
\_\_\_\_\_
- Mobile No. \_\_\_\_\_
- E-mail address \_\_\_\_\_
5. Educational qualifications: \_\_\_\_\_

Paste here your recent self-attested passport size photograph

Exam/ Degree	Univ./Board	Year of passing	Marks obtained/ Total marks	% of marks	Division
Matric					
12 <sup>th</sup>					
BA/B.Sc./B.Com./ LLB./B.Tech. etc.					
M.A./M.Sc./M.Com./ LLM./M.Tech. etc.					
M.Phil.					
Ph.D.					
Any other					

6. NET/SLET/Ph.D.: \_\_\_\_\_
7. Mention the status of Ph.D. awarding University \_\_\_\_\_  
(i.e. Central/State/Deemed/Private University with NAAC Grade)
8. Category (Gen./SC/BC/ESM/SBC/EBPG/PWD): \_\_\_\_\_
9. Teaching Experience: (subject to production of experience certificate)

Name of the Employer	Post held	Pay Scale/ Consolidated pay	From	To

10. Research Experience: \_\_\_\_\_
11. Field of specialization: \_\_\_\_\_

I certify that the above information given by me is true to the best of my knowledge and belief. If at any time, I am found to have concealed any material/information or given any false details, my engagement shall be liable to be summarily terminated without notice or compensation.

Dated: \_\_\_\_\_  
Place: \_\_\_\_\_

(Signature of the candidate)  
Mob. No.: \_\_\_\_\_  
E-Mail ID.: \_\_\_\_\_

## CONSENT

I hereby give my consent to join the Department of Pharmacy, Chaudhary Devi Lal University, Sirsa in case of selection for Part Time Teacher in the Department of Pharmacy as per terms and conditions laid down in the University.

Signature

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Mobile No.: \_\_\_\_\_

Email ID: \_\_\_\_\_