



NEHRU GROUP OF INSTITUTIONS

(Sponsors : Nehru College of Educational and Charitable Trust)
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2010 - 2011

P. K. DAS Memorial BEST FACULTY AWARD

FORM OF APPLICATION

1. Name :
2. Designation :
3. College / Institution :
4. Department :
5. Discipline :
6. Category (Senior / Junior) :
7. Address for Communication :

- a) Mobile No :
- b) Land Line No :
- c) E-Mail ID :

9. Qualification with specialization:

Degree	Major	Specialization	Year of Passing	University	% of Marks	University Rank if Any
P.G.						
M.Phil.						
Ph.D.						

10. Post – Doctoral qualification if any

S.No	Nomenclature of Qualification	Area of Specialization	Year of Passing

11. Additional Qualification if any (Degree / Diploma/ Certification)

S.No	Qualification	Year of Passing

12. Teaching Experience

Classes	Years		Institutions	Department	Duration
	From	To			
U.G.					
P.G.					
TOTAL					

13. Achievements in teaching:

(Juniors: During the past 10 Years)

(Seniors: During the past 15 years)

Classes Taught	Subjects Handled	Academic Years		Results Produced % Pass	University Rank If Any Produced	Work Load Hours/week
		From	To			
U.G.						
P.G.						

Note: Furnish details of the following in maximum of 5 sentences

- Novel methods of teaching adopted
- Teaching aids / Materials used.
- Teaching methods / Materials invented
- Innovative methods adopted for maximizing pass percentage / producing Distinction and University Ranks.
- Innovative methods adopted to make the students knowledgeable and employable
- Innovative methods adopted to maintain students discipline

Research Guidance 13.2 Accomplished

S.No.	Name of the Student / Students	Title	Centre	Date of commencement	Date of completion

Research Guidance 13.3 On Going

S.No.	Name of the Student / Students	Title	Centre	Date of commencement	Date of completion

14. Research Projects 14.1 Accomplished

S.No.	Name of Project	Funding Agency	Fund received	Date of commencement	Date of completion

14.2 On-going

S.No.	Name of Project	Funding Agency	Fund received	Date of commencement	Date of completion

15. Visits Abroad

Country	Purpose	Duration		Own Expenses / Funded by	Qualification acquired if any	Experience gained if any
		From	To			

16. Details of Publication : 16.1 Articles

S.No.	Name of the Journal	National / International / Refereed	Title	Author(s)	Date of Issue and Volume	Page Nos.

16.2 Books / Book lets/ Monographs published / under publication.

S.No.	Title	Year of Publication	Author(s)	No. of pages	Price

16.3 In house Magazines / News Letters / Journals

S.No.	Position	Name	Period	
			From	To
1	Editor			
2	Member			

17. Seminars - Paper Presentation / Participation 17.1 State Seminar

S.No.	Name of the Event	Date(s)	Address of the Institution/ Organization where held	Theme of the Seminar	Title of the paper presented / participated

17.2 National Seminar

S.No.	Name of the Event	Date(s)	Address of the Institution/ Organization where held	Theme of the Seminar	Title of the paper presented / participated

17.3 International Seminar

S.No.	Name of the Event	Date(s)	Address of the Institution/ Organization where held	Theme of the Seminar	Title of the paper presented / participated

17.4 Seminars / Meeting- Presided over / Addressed:

S.No.	Nature of Participation	Name of the Event	Date(s)	Address of the Institution / Organization where held	Title of the paper presented / participated
1.	Presided Over				
2.	Addressed				

17.5 Seminars / Events Organized:

S.No.	Name of the Event	Date(s)	Address of the Institution / Organization where held	College Level / Inter College Level

18. Research Activities

S.No.	Name of the Research Degree	Year of Registration	Year of Passing	Title of Thesis	Date of Public viva	Remarks of the examiners

19. University Assignments / Representation:

S.No.	Position	University Bodies	Period	
			From	To
1.	Member	Syndicate		
2.	Member	Senate		

20. Board of Studies / Examination

S.No.	Position	Name of the Board	Period	
			From	To
1.	Chairman			
2.	Member			
3.	Chairman			
4.	Examiner			

21. Ph.D Public Viva

S.No.	Position	Name of the Candidate	Title of the Thesis	Venue	Date
1.	External Examiner				

22. Role in conducting campus Interviews :

S.No.	Position	Period		Date	Companies Participated	No. of Students Appeared	No. of Students Selected
		From	To				

25. Membership in the University Inspection Commission

S.No.	Position	Subject	Name of the Commission (subject)	Date of Inspection
1.	Chairman			
2.	Member			

26. Furnish any other relevant information to be considered for the award :**27. Are you a recipient of Best Faculty Award 2009-2010 ?**Yes No

N.B :

1. Short listed candidates will be requested to do a power point presentation for 15 minutes on their area of expertise followed by an interview for a total of 20 marks.
2. The score of the presentation and interview will be added with the total as per the merit of the candidate through the application

Declaration

I hereby declare that the above informations furnished are true to the best of my knowledge.

Designation :

Name :

Signature :

Date :

Certified that I have verified the facts furnished above and found to be true.
Forwarded for consideration

PRINCIPAL
(Name and Signature)

List of Enclosures :