	DELHI SKILL AND ENTREPRENEURSHIP UNIVERSITY **(A State University Established under Govt. of NCT of Delhi Act 04 of 2020)** **DSEU Head Office, Dwarka Campus** **Sector 9, Dwarka, New Delhi – 110077**

APPLICATION FORM FOR EMPANELMENT OF VISITING/GUEST FACULTY
(On Part-Time Basis)

Note
1. Fill in application in block letters
2. Attach separate page(s) in case of insufficient space in any column.
3. See website (www.dseu.ac.in) for more details about programme and Campus

Passport size photograph

1. Name in full   (BLOCK LETTERS)   :   _____

2. Address for correspondence   : _____

                                            _____

3. (a) Tel. no. (with STD code)   : _____

     (b) Mobile no.   : _____

          Alternate Mobile No.   :   _____

(c) E-mail address   :   _____

4. Date of birth   :   ☐☐ (Day) ☐☐ (Month) ☐☐☐☐ (Year)

5. Nationality/citizenship   :   _____

6. Permanent Address   : _____

7. Educational qualifications (attach additional pages if necessary): **Self attested copies to be attached**

Examination/Degree	**School/Board/University/**	**Year Awarded**	**Division**	**Percentage marks/ grade**
10TH				
12th				
Graduation or equivalent				
Post-Graduation or equivalent				
MPhil				
PhD				
Other (NET)				
Any other				

8. Title of MPhil thesis   : _____

_____

9. Title of PhD thesis   : _____

_____

Discipline/area in which awarded: _____

Name(s) of the PhD supervisor(s) : _____

_____

10. Experience (starting with the most recent, attach additional pages if necessary): **Self attested copies To be attached**

Name of the institution/ organization	Post held	Period		Nature of work
		From	To	

11. **Publications**: *Provide details of books (single author and co-authored or edited), journal articles/papers, other professional writing or accomplishments (e.g., performances, recordings, films, official reports). Details should include publisher / journal names, volume numbers, publications dates, page numbers, ISBN numbers, etc. (Attach additional pages if necessary).*

12. Language(s) known:

Language (s) known (Please tick)	Read	Write	Speak
(i) English			
(ii) Hindi			
(iii)			
(iv)			

13. Other relevant information you wish to provide (e.g., membership of professional bodies; editorships; membership of national / international committee; technical / professional / artistic credentials; government commendation, etc.).

_____

_____

14. Certified that the information given by me in this form is complete and correct to the best of my knowledge and nothing has been concealed. I consent to the University verifying information given in this form.

Date:

Place:

Signature