



Punyashlok Ahilyadevi Holkar Solapur University, Solapur



APPLICATION FORM FOR THE POST OF DIRECTOR OF STUDENTS' DEVELOPMENT

(Read carefully the complete circular, instructions and application form before filling it)

Circular No. PAHSUS/Estt/2025/

Dated –

To,
The Registrar,
Punyashlok Ahilyadevi Holkar Solapur University,
Kegaon, Solapur - 413 255.

Paste Recent
PASSPORT PHOTO
(Do not staple)

Sub. : Application for the Post of Director of Students' Development.

1) Name in Full :

(Surname first) (in Capital Letters)

2) Address for correspondence :

3) Permanent Address :

4) Contact Details :

Phone No : (Residence) : _____ (Office) _____ (Mob.) _____

FAX No : _____ E-mail : _____

5) Nationality : _____ State of Domicile _____

6) (a) Date of Birth : _____
 (b) Present Age : Years : _____ Months : _____ Days : _____
 (Attach true copy of S.S.C Board Certificate Or Schools Leaving Certificate)

7) Whether member of SC/ST/VJ/NT/SBC/OBC ? YES/NO
 If yes, specify-CATEGORY : _____ CASTE : _____
 (Attach true copy of the Caste Certificate)

8) Educational Qualifications:
 (Please attach mark Sheets/Degree Certificates in chronological order)

Exams/ Degrees	Name of Exam.	University/ Board	Division	Attempts	Year of Passin g	% of marks obtaine d	Major subjects offered (spec8ialization , if any)	Merit/Prizes /Medals conferred
Ph.D.								
M.Phil.								
P.G.								
U.G.								
H.S.C								
S.S.C								
Others								

9) Particulars of Teaching Experience (Attach supporting documents)

Sr. No.	Name of the Institution	Post-held with pay scale/pay band+ AGP	Teaching Experience	
			From	TO
1				
2				
3				
4				
5				

i) Under-Graduate _____ Years ii) Post Graduate _____ Years

10) Particulars of experience in respect of extra curricular and extension activities: -

Sr. No.	Name of the Institution/College	Post-held	Nature of Activity	Experience	
				From	TO
1					
2					
3					
4					
5					

(Attach supporting documents/proofs) (Attach separate sheet, if required)

11) Details of annual Confidential Reports of last 5 years :

Sr.No.	Year	Remark/Gradation in C.R.
1		
2		
3		
4		
5		

(Attach attested copies of relevant C.R.s.)

12) Any other information as the applicant desires to submit:

DECLARATION

I, _____ hereby declare that all the information given above is true to the best of my knowledge and belief. I am not aware of any circumstances which may impair my fitness for employment in Punyashlok Ahilyadevi Holkar Solapur University, Solapur, I have never been disqualified/debarred from appearing in any University Examination/University Work. I have never been dismissed from University/College/Government Service and no Departmental Enquiry is proposed/pending against me.

Place:

Date:

Signature of Applicant

NO OBJECTION CERTIFICATE

Certified that Dr./Shri./Smt./Ku. _____
is Working on the post of _____ w.e.f. _____ in the pay
scale/pay band of Rs. _____ with Ago Rs. _____ drawing the
basic pay of Rs. _____. This Office has no objection if he/she is nominated for
the post of **Director of Students development** in the Punyashlok Ahilyadevi Holkar Solapur
University, Solapur and will be relieved within the stipulated period.

Place:

Date:

Signature of employer /Competent Authority

With designation & Seal