



SHRI RAM COLLEGE OF COMMERCE

University of Delhi, Maurice Nagar, Delhi - 110 007
Website: www.srcc.edu Phone: 27667905, 27666519

SRCC/AD/02/2022

December 1.12.2022

NOTICE

Interview for Guest Faculty in the Department of Economics, SRCC

With reference to our Notice dated October 31, November 07 and 23, 2022 published on the College and University website for Guest Faculty positions in the Department of Economics, this is to inform all the candidates who have applied against the notified posts through the Google Form that Personal Interviews have been scheduled as follows:

Reporting Date : 03.12.2022 (Saturday)

Reporting Time : 10:00 A.M.

Venue : Committee Room, SRCC

Candidates are advised to report for the Personal Interview as per the schedule. At the time of reporting for Interview, candidates are required to submit duly filled and signed Application Form in the Form attached herewith. Before appearing for the Interview, the candidates are advised to ensure that they fulfil the required eligibility, terms and conditions for appointment of Guest Faculty as per the rules of the University of Delhi.

Please note that no TA and TD will be paid for appearing for the Personal Interview.


Administrative Officer



SHRI RAM COLLEGE OF COMMERCE
(University of Delhi)

Sl.No.
(In Ad hoc Panel)

**APPLICATION FORM FOR THE POST OF
GUEST LECTURER**

DEPARTMENT _____
(Hindi/English/Commerce/Economics/Political Science/Mathematics)

1. Name (In Block letters) : _____
2. Father's/Husband Name : _____
3. Date of Birth : _____
4. Category & Gender : _____ / _____
5. Address for communication : _____
: _____
6. Mobile/Telephone No : _____
7. Email Id : _____
8. Educational Qualification :

| Exam Passed | Year of Passing | Institutions & University | Main Subjects | Percentage of marks | Division |
|------------------------|-----------------|---------------------------|---------------|---------------------|----------|
| Undergraduate | | | | | |
| Postgraduate | | | | | |
| M.Phil. | | | | | |
| Ph.D | | | | | |
| Any Other | | | | | |

9. Whether NET/SLET cleared

YES/NO
(Please tick)

Month/Year { }

10. Teaching Experience (if any) :

| Name of College/University | Designation | Nature of Appointment (Temp./Ad-hoc/Guest) | Period | |
|----------------------------|-------------|---|--------|----|
| | | | From | To |
| | | | | |
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11. Subject Specialization :

(1) _____

(2) _____

(3) _____

(4) _____

DECLARATION

I hereby affirm and declare that the information given above by me is correct and to the best of my knowledge.

Date: _____

(Signature of Applicant)
