

SHRI RAM COLLEGE OF COMMERCE

University of Delhi, Maurice Nagar, Delhi – 110007 Phone: 27667905, 27666519 • Fax: 27666510

May 25, 2022

WALK-IN-INTERVIEWS FOR ASSISTANT PROFESSOR ON AD-HOC BASIS

Applications are invited from eligible candidates for the post of Assistant Professor in the **Department of Economics** of the College on Ad-hoc basis against Leave Vacancy for about two months as per following schedule:-

Vacancies under different categories	Department	Date of Interview	Reporting Time	Venue of Interview	
UR-01	Economics	27.05.2022	09.00 AM	Committee Room, SRCC	

Interested candidates are advised to register their name with the Principal's Office, as per schedule above, with their recent CV. Candidates should fulfill required eligibility for appointment as Assistant Professor and their name should be in the Ad-hoc panel of the concerned Department of the University of Delhi.

The College reserves the right not to fill the vacancy as per requirement of the workload and corresponding roster.

Please note no T.A. or D.A. will be paid for appearing in the Interview.

Teacher In Charge

Department of Economics

PRINCIPAL

SHRI RAM COLLEGE OF COMMERCE

(University of Delhi)

Sl.No.	
(In	Ad hoc Panel

APPLICATION FORM FOR THE POST OF ASSISTANT PROFESSOR (AD-HOC)

DEPARTMENT_

		(Hindi/E	inglish/	Commerce/Economics/	Political Scien	nce/Mathematic	cs)
1. Name (In Block	letters)						
2. Father's/Husl	oand Nan	ne	:				
3. Date of Birth							
4. Category & G	ender		:		_/		
5. Address for co	ommunica	ation	:				
			:				
6. Mobile/Telep	hone No		:				
7. Email Id			:				
8. Educational Q	Qualification	on					
Exam Passed	Year of Passing	Institution University		Main Subjects		Percentage of marks	Division
Undergraduate							
Postgraduate							
M.Phil.							
Ph.D							
Any Other		246					

9. Whether NET/SLI10. Teaching Experier		YES/NO (Please tick)	N	Month/Year {	}		
Name of College/University	Designation		Nature of Appointment (Temp./Ad-hoc/Guest)		Period		
		(remp., rau-no	cy Guesty	From	То		
				C-S-Y-RIE	1 1 1 1 1 1		
11. Subject Specializa	ation :						
(1)		_ (2).					
(3)		_ (4).					
]	DECLARATION					
I hereby affirm and do of my knowledge.	eclare that the inf	formation given a	bove by	me is correct	and to the best		
Date:				(Signature o	f Applicant)		