

DEPARTMENT OF MATHEMATICS
National Institute of Technology
Kurukshetra-136119

MA/23/165

Dated: 23/02/2023

ENGAGEMENT OF GUEST FACULTY

(Ref. No.: Estt.I/4236, dated: 23-07-2019, Estt.-I/4031, dated: 27-09-2022)

(Walk in Interview)

The **Department of Mathematics** requires **Guest faculties** to meet out the teaching load requirement for UG (B.Tech.) classes on lecture basis @1500/- per lecture plus 10% extra for examination related evaluation work subject to a maximum amount of Rs 70,900/- per month for candidate with Ph.D. degree. Two tutorials/ seminars will be treated equivalent to one lecture.

Eligibility Criteria:

First class at both UG and PG level (60% or 6.5/10 CGPA) with Ph.D. awarded before the date of Interview.

The interested candidates must visit for Walk in Interview in the Department of Mathematics NIT, Kurukshetra on 27/02/2023 (Monday) at 11:00 AM with originals testimonials. Submit your applications in the prescribed form (attached) along with the self-attested copies of documents in the Department office before the Interview.

No TA/DA will provided for Interview

For any query email at hodmaths@nitkkr.ac.in , shashi.mathkkr@gmail.com.



(Head of Department)

Copy to:

1. Prof. In charge CCN for uploading on the Institute website.
2. PS to Director for kind information of Hon'ble Director.
3. All HoDs for circulation.
4. Dean (FW).
5. Registrar In charge.

16. Details of Professional training obtained, if any, during the period of service:

17. Details of experience – starting with the present post/retired from (separate sheet may be Attached, if required)

Post Held	Name of Organization	Period		Pay Band + Grade Pay	Length of Service in years	Nature of duties Performed
		From	To			
Total length of experience in years :						
Knowledge of Computer :						
If selected, what notice period required for joining :						

18. Any other information:

DECLARATION

It is certified that the information provided as above, is true & complete in all respect and to the best of my knowledge & belief. If anything is found wrong / incorrect, my application will be treated as cancelled and withdrawn.

(Signature of the Applicant)

Date:
Place:

Name:
Address: