

**DEPARTMENT OF MATHEMATICS
NATIONAL INSTITUTE OF TECHNOLOGY KURUKSHETRA
KURUKSHETRA 136 119**

No.CH/24/

No./GH/24/1680
Dated: 20th June, 2024

ENGAGEMENT OF GUEST FACULTY

The Department of Chemistry requires **Four Guest Faculty** (01 preferably with Physical Chemistry Specialisation) to meet out the teaching load requirement for U.G and P.G. classes during the upcoming odd semester on per lecture basis @1500/- per contact hour plus 10% extra for examination related evaluation work, subject to a maximum amount of Rs. 70,900/- per month for a candidate with Ph.D. degree, Lab classes, seminars etc. of 02 contact hours duration will be treated as 01 contact hour for the purpose of honorarium.

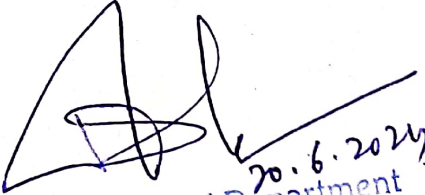
Eligibility Criteria:

First Class at both B.Sc. and M.Sc. Level (60% or 6.5/10 CGPA) with Ph.D. awarded.

The interested candidates must submit their application in the prescribed application form along with self-attested copies of certificates and mark-sheets either by post or in person in the office of the Department of Chemistry or through e-mail at hodchemistry@nitkkr.ac.in on or before **05th July, 2024 (Friday) by 5.00 p.m.**

Postal Address:

Head, Department of Chemistry
National Institute of Technology Kurukshetra-136119
For any query email at hodchemistry@nitkkr.ac.in


20.6.2024
HOD, Chemistry
Department of Chemistry
National Institute of Technology
Kurukshetra-136119

Copy to:

1. Prof. I/C (CCN) for uploading on the Institute Website.
2. Registrar In-Charge
3. Assistant Registrar to Director for kind information of Hon'ble Director
4. Notice Board





NATIONAL INSTITUTE OF TECHNOLOGY
KURUKSHETRA-136119

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APPLICATION FORM

Application for the post of Advt. No.:

1. Name of the Applicant.....
2. Father's/Husband's Name.....
3. Nationality.....
4. Date of Birth:.....
5. Category (SC/ST/OBC/GEN):
6. Gender (Male/Female):.....
7. Marital Status:.....
8. PAN, Number (attach copy of PAN Card):
9. Aadhhar No. (attach copy of Aadhar Card):
10. Last pay drawn/emoluments at the lime of retirement (if applicable):.....
11. Present Address:.....
.....
.....Pin Code.....
E-mail ID:..... Phone/Mobile No.:.....

12. Particulars of Examination passed:

Exam Passed	Year of passing	Board/University	Subjects	Percentage of marks

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

17. Details of experience –

Post Held	Name of organization	Period		Pay Band + Grade Pay	Length of service in years	Nature of duties in performed
		From	To			
Total length of experience in years :						
Knowledge of computer:						

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:

