

**Part-C (Table-I and declarations)**

**Information submitted for the promotion from \_\_\_\_\_  
to \_\_\_\_\_ under CAS, with documentary evidence.**

**Table-I (as per Appendix-II of UGC Regulations-2018)**

	<b>Items</b>	<b>Give Details*</b>	<b>Documentary Evidence Attached at Annx.</b>
(A)	Administrative responsibilities such as HEAD, Chairperson/ Dean/ Director/ Coordinator/ Warden etc.		
(B)	Examination and evaluation duties assigned by the college / university or attending the examination paper evaluation.		
(C)	Student related co-curricular, extension and field-based activities such as student clubs, career counselling, study visits, student seminars and other events, cultural sports, NCC, NSS and community services.		
(D)	Organising seminars/conference/workshops other college/university activities.		
(E)	Evidence of actively involved in guiding Ph.D. student. If submitted with Part-B, please mention the annexure number.		
(F)	Conducting minor or major research project sponsored by National and International agencies. If submitted with Part-B, please mention the annexure number.		
(G)	At least one single or joint publication in peer-reviewed or UGC list of Journals. If submitted with Part-B, please mention the annexure number.		

\*Attach additional sheet(s) if necessary

Signature of Applicant  
Date:

Signature of Head with seal  
Date:

## **DECLARATION**

This is to certify that Dr./Mr./Ms. \_\_\_\_\_ of the School of \_\_\_\_\_ has satisfactorily **completed following examination duties** assigned to him during the \_\_\_\_\_ to \_\_\_\_\_. (Please mention the duration of evaluation)

Examination Duties Assigned and Performed at the Department Level (From \_\_\_\_\_ to \_\_\_\_\_)

<b>Sl. No</b>	<b>Name of the Examination</b>	<b>Duties Assigned</b> (Question setting/ invigilation/ Answer sheet evaluation)	<b>Extent to which carried out (%)</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Signature of Applicant  
Date:

Signature of Head with seal  
Date:

## **DECLARATION**

(To be submitted only if, Registration Letter is not available)

This is to certify that Dr. \_\_\_\_\_ of the School of \_\_\_\_\_ is currently supervising following Ph. D. students assigned to him/her since \_\_\_\_\_.

<b>Sl. No</b>	<b>Name of the student</b>	<b>Broad Area of Ph. D. Dissertation</b>	<b>Date of admission</b>

Signature of Applicant  
Date:

Signature of Head with seal  
Date:

## **DECLARATION**

This is to certify that I, Dr./Mr./Ms. \_\_\_\_\_ of the School of \_\_\_\_\_ have **completed** \_\_\_\_\_ % of classes assigned to me during the Assessment Period \_\_\_\_\_ to \_\_\_\_\_.

Signature of Applicant  
Date:

Signature of Head with seal  
Date: