

SIKKIM PUBLIC SERVICE COMMISSION

OLD TOURISM COMPLEX, M.G.MARG, GANGTOK, SIKKIM - 737101

For Office Use Only

Fax: 03592-207572. Email: $\underline{spsc\text{-skm@nic.in}} \ Website: \\ \underline{www.spscskm.gov.in}$

FORM A

(FACULTY POSITION IN SIKKIM GOVERNMENT PHARMACY COLLEGE)

 Name of the l Personal Det 			No. & Date			HOTOGRAPH signature across	
Name		First Nan	ne	Middle Name	S	urname	
Date of Birth	Date Month Year		Age as on last date of application	G	Gender *		
					Male	Female	
Father/Husband Name							
Mother's Name							
Marital Status							
Nationality							
Category				Religion			
3. Address for Co	ommunic	ation and Pe	ermanent Ad	Idress			
For Communicati	ion						
		PIN COD					
		Mobile No	o.:				
Permanent							

PIN CODE:

4. Educational/Academic Qualifications

Details of Qualifications	Name of School /Board/ University		Year of Passing	% of marks obtained	Division/ Class/ d Grade
X					
XII					
80% & Above		60% to less than 80%	55% to les 60%	45% to less than 55%	
Graduation*					
	80% & Above	60% to less than 80%	55% to less	than 60%	
Post Graduation	*				
M.Phil*	60% & above 55% to less than 60%				
WI.PIIII*					
Ph.D*	Yes NO				
NET with JRF	NET S	SLET			
Teaching/Post-D (in years)	Ooctoral Experience:				

5. Research Publication

Sl.No.	Title with Pg.No.	ISSN/ISBN No.	Whether peer reviewed/ UGC listed

^{*} Tick mark ($\sqrt{}$) at the appropriate box

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International/National Level (Awards	State-Level (Awards	given	by	State
given by International Org./Govt. of	Government)			
India/ Govt. of India recognized National				
Level Bodies)				
	given by International Org./Govt. of India/ Govt. of India recognized National	given by International Org./Govt. of Government) India/ Govt. of India recognized National	given by International Org./Govt. of India/ Govt. of India recognized National	given by International Org./Govt. of India/ Govt. of India recognized National

LIST OF ENCLOSURES: (Attach copies of certificates, sanction orders, papers etc. wherever necessary)

- 1 Sikkim Subject Certificate or COI.
- 2 Class X & XII Mark Sheet & Certificate.
- 3 Degrees in relevant fields.
- 4 Valid Unmarried Certificated (for female candidate).
- 5. In case of married women candidate, COI/SSC of Husband should be enclosed.
- 6. Valid Local Employment Card.
- 7. No Objection Certificate from the Head of Department in case of employed candidate.
- 8. Registration Certificate from Pharmacy Council of India or State Pharmacy Council.
- 9. Research Papers.
- 10. Certificate of Awards.

I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature is liable to be cancelled/ my appointment is liable to be terminated.

Place:	
Date:	Signature of the Candidate