

**RANCHI UNIVERSITY**  
**Application for Promotion of Lecturer to the post of Reader**  
**under 10 yrs. Time Bound Scheme.**  
**Statute as approved by Chancellor vide Letter no. - BSU-20/92-2680/GS(1) Dated -**  
**14.09.1992 Validity - 01.02.1985 (Para- 12) to 22.09.1995**

(In case of incomplete or ambiguous information, it will not be entertained.)

1. Name of the Candidate : \_\_\_\_\_

2. Subject : \_\_\_\_\_

3. (a) Name of the College : \_\_\_\_\_

(b) It is Affiliated or Religious & Linguistic Minority College : \_\_\_\_\_

If Religious & Linguistic Minority College, Mention date of declaration for Minority College : \_\_\_\_\_

(enclose letter of the Govt.) :

4. Name of the University : \_\_\_\_\_

5. (A) Date of substantive appointment as Lecturer ( Para 1(I)(b) of the Statute) : 

D	D	M	M	Y	Y	Y	Y
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(i) Date of Affiliation : 

D	D	M	M	Y	Y	Y	Y
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 (ii) Date of post creation : 

D	D	M	M	Y	Y	Y	Y
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(iii) Date of recommendation by the Commission for the post of lecturer (in case of affiliated college): \_\_\_\_\_

or

Date of approval by the commission for the post of lecturer (in case of Religious & Linguistic Minority College) :

\_\_\_\_\_

(enclose letter of the commission)

(B) Date of confirmation as Lecturer (By G.B.) :

(C) Whether formation of the G.B. is as per Statute : Yes/No

(D) Approval of the Syndicate obtained : Yes/ No

If yes, attach letter.

(E) Whether the candidate holds the qualifications as prescribed for the post of Lecturer under the statute in forced at the

time of his appointment and has fulfilled the conditions ( Para 1(I)(a) of the Statute) : Yes  No

6. Computation of admissible period for promotion to Reader ( Para 1(I)(c) of the Statute) :

Sl.	Particulars	From	To	<u>Duration</u>						
(a)	Period rendered in affiliated college (Degree level).			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>	Y	Y	M	M	D	D
Y	Y	M	M	D	D					
(b)	Period rendered in religious and Linguistics Minority College (Degree level)			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>	Y	Y	M	M	D	D
Y	Y	M	M	D	D					
(c)	Total admissible period under Time Bound Scheme			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>	Y	Y	M	M	D	D
Y	Y	M	M	D	D					
(d)	Date of completion of ten years of continuous service as Lecturer			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y					

7. Proposed date of promotion to the post of Reader :

D	D	M	M	Y	Y
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8. Educational Qualification of the Candidate :

Examination	Board/University	Subject	Year of Passing	Division/Class	% of Marks
Matric					
Intermediate					
Graduation					
Post Graduate					
M.Phil					
Ph.D					

9. CC Rolls during period of consideration for calculating ten years continuous service (Original CC Roll need to be enclosed as per Para 2 of the Statute).

(a) Period Prior to 24 -12-1986

Whether CCR were being maintained during this period – Yes No

If Yes, enclose copy of CCRs with comment of Screening Committee

If no enclose certificate with comment of Screening Committee

Give details as follows:

Year	CCR or Certificate	If Certificate please mention name and designation of issuing authority in the corresponding year	Assessment report of Screening Committee

(b) Period after 24-12-1986

(i) enclose CCR in the Prescribed Performa as approved by the Chancellor

(ii) Give details as follows :

Year	Whether CCR enclosed Yes/ No	Remark of the screening committee(Candidates or not required to fill this column)

12. Whether the proposal was ever rejected by the commission (Para 5 of the Statute)

Yes  No

If yes, give details with letter no. of the Commission:

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13. Whether any disciplinary action has been taken against you? If yes, please give details.

14. Total no. of certificate/testimonials attached with the application:.....

Certified that information furnished in the aforesaid paragraphs and the documentary evidence furnished are true and correct. For any omission or commission or wrong information, I shall be held solely responsible.

Date:

Place:

List of Enclosure:

Signature of the Applicant

**(To be filled in by the Head of Institution/Department)**

- 1) Certified that the statement made above by the applicant have been found true and correct in respect of records and/or relevant testimonials and certificates.
- 2) Certified that C.C.R of the applicants is attached herewith in a sealed cover along with each application.
- 3) Certified that statements made in the applications have been verified.

Signature of the Head of the  
Institution/Department

Date:

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**(To be filled in by the Office of the Registrar)**

1. The application has been checked and found complete in all respects or incomplete in the following respect:-
2. Nothing in the records of the University is known to the contrary of the statement made by the applicant and certified by the Head of the Institution/Department concerned.

Signature of the Section Officer

Signature of the Officer Incharge

Signature of the Registrar

Date:

Seal of the University