



SHIVAJI UNIVERSITY, KOLHAPUR-416 004. MAHARASHTRA

PHONE : EPABX - 2609000 GRAM : UNISHIVAJI

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शिवाजी विद्यापीठ, कोल्हापूर - ४१६ ००४. महाराष्ट्र

दूरध्वनी (ईपीएबीएक्स) २६०९००० (संलग्ना विभाग - २६०९०८९, २६०९०९०)

फॅक्स : ००९१-०२३१-२६९१५३३ व २६९२३३३

Website : [www.unishivaji.in](http://www.unishivaji.in) e-mail : [affiliation1@unishivaji.ac.in](mailto:affiliation1@unishivaji.ac.in)

एसयु/संलग्नता/टे-३/एसडीएम/

No 1 1 1 4 8

दि. 15 OCT 2018

परिपत्रक

प्रति,

मा. संस्थाअध्यक्ष/प्राचार्य/संचालक

सर्व संलग्नित महाविद्यालये/मान्यता प्राप्त शिक्षण संस्था.

**विषय :-** चेंजीस इन स्टाफ मान्यतेच्या शुल्कवाढीबाबत..

**संदर्भ :-** या कार्यालयाचे जा.क्र.एसयु/संलग्नता/टे-३/एसटीएस/१ दि.०१.०४.२०१४ चे परिपत्रक.

महोदय/महोदया,

उपरोक्त विषयास अनुसरून अधिकार मंडळाच्या निर्णयानुसार आपणास कळविण्यात येते की, आपल्या महाविद्यालयातील शिक्षक/प्राचार्य यांच्या नवनियुक्ती व बदलीनुसारचे चेंजिस इन स्टाफ मान्यतेचे आकारावयाचे सध्याचे शुल्क रु.५००/- ऐवजी रु.१०००/- करण्यात आले आहे, याची नोंद घ्यावी.

तसेच इथून पुढे नव्याने आकारण्यात आलेले शुल्क रु.१०००/- चा डी.डी अथवा रोखीने या कार्यालयाचे A.२.R.२५ या अंदाजपत्रकिय शिर्षकाखाती भरून त्याची पावती चेंजिस इन स्टाफ प्रस्तावासोबत जोडण्यात यावी व सदरची बाब महाविद्यालयातील सर्व संबंधितांच्या निदर्शनास आणावी.

कळावे,

आपला विश्वासू

उपकुलसचिव,  
संलग्नता विभाग

प्रत :- लेखा विभाग,

माहितीसाठी व योग्य त्या कार्यवाहीसाठी.

No.

Price Rs. 1000/-

## SHIVAJI UNIVERSITY, KOLHAPUR

### Report of Changes in Teaching Staff

#### Instructions :

- 1) This form is to be used for obtaining approval of the University to :
  - i) New Appointments
  - ii) Substitute Appointments
  - iii) Transfers
  - iv) Change in Designations
- 2) Certified copies of the following documents must be attached with this form :-
  - a) The appointment order of the teacher as per Statute 195-Appendix-A or transfer order.
  - b) The University letter/s granting approval to the Selection Committee Report/Changes in Staff

#### Report

- c) P. G. Recognition, if any
  - d) In case of Inter University Transfer.
    - i) approval letter of the concerned University
    - ii) permission letters for transfers of both the Universities
  - e) If Ph. D. Thesis submitted before 31st, December, 2002, xerox copy of University Receipt must be enclosed.
  - f) Copy of Declaration/Notification of award of M. Phil./Ph. D. Degree
  - g) Copy of Caste certificate
  - h) NET / SET passing certificate.
  - i) 9" x 5" self addressed envelop with Rs. 5/- postage stamp affixed should be attached with each change in staff form of the concerned teacher.
- 3) In case of teacher, the form should be signed by the Principal.
  - 4) In case of Principal, the form should be signed by Chairman/Secretary of the Management.
  - 5) Fully qualified candidates selected through University Selection Committee in a clear vacancy must be appointed on Probation.
  - 6) Candidates selected through University Selection Committee in a clear vacancy but who do not have the necessary qualification, i.e. NET/SET or are not exempted from NET/SET will be appointed on Ad-hoc basis.
  - 7) **Any changes occurring during a term should be reported within fifteen days from the date of change**
  - 8) Incomplete forms will not be considered and the forms will be sent back

- 
1. Name of the College / Institute :
  2. Name of the Teacher Appointed  
(Beginning with Surname in BLOCK Letters) :
  3. Date of Birth :
  4. Nature of Appointment : \* Full Time / Part Time / C. H. B. / ☒ Honorary
  5. Tenure of Appointment : \* Temporary / Adhoc / Probation / Permanent / Honorary
- (\* Strike out whichever is not applicable)
6. Previous Designation \_\_\_\_\_ Present Designation \_\_\_\_\_  
(If any)
  7. Whether it is a New Appointment or :  
Substitute Appointment or an Appointment  
due to the Transfer or promotion if any.

(2)

8. Date of Appointment in Sanstha :
9. Date of Joining in this College :
10. Letter No. and Date of University letter granting approval to the Selection Committee Report : (for new appointments) :
11. Letter No. and Date of Approval of the University to the appointment (Changes in Staff) if any, (in transfer cases) :
12. Subject/s for which approval has been given :
13. a) Scale of Pay :  
b) Present Basic Pay :  
c) Allowances :  
d) Total emoluments :  
e) Previous Pay Scale if appointment is due to change in Designation :
14. Whether opted for Provident Fund / Pension :
15. a. Whether Recognised as a Post-Graduate Teacher (A copy of approval letter to be enclosed) :  
b. Subject in which Post-Graduate Recognition is sought :  
c. University Letter No. : Date of Recognition :  
d. By Papers : By Research :  
e. Research Guidance, if any  
M. Phil. :  
Ph. D. :

## 16. Qualifications

Name of the Examination	University and Year of Passing	Percentage of Marks	Name of Subjects with no. of Papers Offered		Class Obtained
			Principal level	Sub-ordinate level	
1. Degree					
2. Post-Graduate					
3. SET/NET or any other equivalent					
4. M. Phil. / Ph. D. Degree : Title of the Thesis :					
5. * Teaching Qualifications ** or Professional Qualifications					
6. Any Other Qualification					

\* In case of Teachers in the Faculty of Education

\*\* In case of Teachers in the Faculty of Engineering / Law / Commerce

†17. 1. Professional Experience : Years :

2. Member of Professional Institutes, :  
and type of Membership If any :

3. Administrative Experience : Years :

4. Professional Experience :  
Standing at Bar  
(In case of Law Teacher)

(† In the Case of Teachers in the Faculty of Engineering / Law / Commerce)

I here by declare that the Information given as Sr. No. 1 to 17 is Correct as per recored

Principal/Director  
In case of TeaderChairman/ Secretary  
In Case if Principal/ Directore

(4)

18. Teaching experience  
a) As Lecturer / Principal

Name of the College / Institute	Name of the University to which the College / Institute is affiliated	Experience					
		Degree teaching		Post-graduate teaching			
		Subject	From	To	Subject	From	To

- b) Total teaching experience under (a) above :

Teacher's Permanent Address :

Shri / Smt. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby declare that the information given as Sr. No. 16 to 18 is correct.as, per record

Date :

Principal/Director      Chairman/Secretary      Signature of Teacher  
(in case of teachers) (in case of Principal/Director)

(5)

19. Teaching work assigned :-

Classes	Subjects	Periods per week			Total
		Lecturers	Practical Periods	Others	

19. A. In case of Part time teacher appropriate details regarding his/her teaching work in other colleges if any, must be given in the following format.

College	Classes	Subjects	Periods per week

(6)

20. Details regarding Vacancy filled up :
1. Whether New Vacancy, if so, :  
Sanction letter No. :  
Date :
  2. Name of the Member who Left :  
(If the vacancy is created due to transfer)
  3. Designation :
  4. Date of Leaving :
  5. Reason for Leaving :
  6. Subject and Classes taught :
  7. University approval letter No. :

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**Certified that I have verified personally the information given above in the form and it is true and correct. as per Record**

Date :

Place :

Principal / Chairman  
College / Management

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# SHIVAJI UNIVERSITY, KOLHAPUR

## Chart Showing the Details of the Teacher's approval of Changes in Staff/Change of Designation

(To be filled by the college/institutions)

File No. :

(For Uty Office use only)

Name of the College : \_\_\_\_\_

Name of the Teacher : \_\_\_\_\_

Designation \_\_\_\_\_

Sr. No.	Subject	Qualifications P. G. Degree Percent- age	Year of Passing	Date of Appointment/ Transfer	Teaching periods per week	Nature of Appointment Full time/ Part time/ C. H. B./ Honorary	Tenure of Appointment Temporary/ Adhoc/ Probation/ Permanent/ Honorary	Experience		Basic Pay	Remarks (For UTY Office Use only)
								Teaching	Profes- sional		
1	2	3	4	5	6	7	8	9		10	11

Principal / Director  
(Signature & Seal)