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SHIVAJI UNIVERSITY, KOLHAPUR-416 004. MAHARASHTRA

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शिवाजी विद्यापीठ, कोल्हापूर - ४१६ ००४. महाराष्ट्र

दूरध्वनी (ईपीएबीएक्स) २६०९००० (संलग्नता विभाग - २६०९०८९)

फॅक्स : ००९१-०२३१-२६९१५३३, २६९२३३३, २६९३२९४.

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परिपत्रक

विषय :- हुद्यातील फेरबदल (Changes in Teaching Staff) अर्जाबाबत,

विद्यापीठाशी संलग्न महाविद्यालयात कार्यरत असलेल्या प्राचार्य व अध्यापकांना नवीन नियुक्ती, बदली, पदनामातील बदल तसेच बदली नियुक्ती झाल्यानंतर विद्यापीठाकडून हुद्यातील फेरबदल (Changes in Teaching Staff) मान्यता दिली जाते. यासाठी विहित नमून्यातील अर्ज आवश्यक कागदपत्रासह संबंधित महाविद्यालयाच्या प्राचार्यामार्फत विद्यापीठ कार्यालयाकडे पाठविला जातो. सदर हुद्यातील फेरबदल चा अर्ज यापूर्वी शिवाजी विद्यापीठ मध्यवर्ती ग्राहक भांडार यांचेकडे विक्रीसाठी ठेवण्यात आलेला होता. सदरचा अर्ज खरेदी करण्यासाठी सर्व संलग्न महाविद्यालयातील शिक्षक किंवा शिक्षकेत्तर कर्मचाऱ्यांना विद्यापीठ कार्यालयात यावे लागत होते. त्यासाठी सर्वांचा वेळ व पैसा वाया जात होता.

उपरोक्त वस्तुस्थितीचा विचार करून, महाविद्यालयीन प्राचार्य, शिक्षकांसाठीचा हुद्यातील फेरबदल (Changes in Teaching Staff) चा अर्ज विद्यापीठाच्या संकेतस्थळावर ठेवण्यात आला आहे. येथून पुढे सदरचा अर्ज विद्यापीठाच्या www.unishivaji.ac.in - BCUD - Circulars या संकेतस्थळावरून सर्व संबंधितांनी डाऊनलोड करून घ्यावा व आवश्यक कागदपत्रासह प्राचार्यामार्फत विद्यापीठाकडे पाठवावा. प्रस्तावासोबत हुद्यातील फेरबदल (Changes in Teaching Staff) अर्जाचे शुल्क रु. १००/- विद्यापीठ कार्यालयात A.2.R.7 या अंदाजपत्रकीय शिर्षकाखाली रोखीने भरावेत. अथवा सदरचा प्रस्ताव टपालाद्वारे पाठविणार असल्यास मा. वित्त व लेखा अधिकारी, शिवाजी विद्यापीठ, कोल्हापूर यांचे नावे रु. १००/- चा धनाकर्ष काढून तो प्रस्तावासोबत विद्यापीठ कार्यालयाकडे पाठविण्यात यावा.

सदरचे परिपत्रक सर्व संबंधितांच्या निदर्शनास आणावे,

जा.क्र.संलग्नता/टे.३/एसटीएस/ १

दिनांक :- १०.४.२०१४

संचालक,

महाविद्यालये व विद्यापीठ विकास मंडळ,
शिवाजी विद्यापीठ, कोल्हापूर

प्रति,

मा. प्राचार्य/ संचालक,

सर्व संलग्न महाविद्यालये / मान्यताप्राप्त शिक्षण संस्था

प्रत :- लेखा विभागास माहितीसाठी व योग्य त्या कार्यवाहीसाठी.

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. :

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 Teader

Chairman/ 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
(in case of teachers) (in case of Principal/Director)

Chairman/Secretary
Signature of Teacher

(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. :

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

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. :

Name of the College : _____

(For Uty Office use only)

Name of the Teacher : _____ Designation _____

Sr. No.	Subject	Qualifications		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)
		P. G. Degree	Percent- age						Teaching	Profes- sional		
1	2	3		4	5	6	7	8	9		10	11

Principal / Director
(Signature & Seal)