

CAS-1998 Scheme

UNIVERSITY OF DELHI

PROFORMA FOR SELF-ASSESSMENT

SECTION-I

1. Name :
2. Designation :
3. Date of Birth:
4. Academic Qualification :
5. Date of Joining the University:
6. Date of confirmation :
7. Teaching Experience :

Name of the Institution	Position held with pay scale	Ad-hoc/ Temporary/ Permanent	From	To	Total Experience		
					Years	Months	Days

(In case of Ad-hoc, temporary experience, please enclose experience certificate)

8. Courses taught at various levels (Name the courses giving details):

a) Undergraduate:

b) Post-graduate:

9. Courses taught during the last three years (give exact details):

	1 st year	2 nd year	3 rd year
a) Undergraduate:			
b) Post-graduate:			

10. Details of sources/materials consulted by you in the courses taught (books, journals, etc.):

11. Details of teaching methods employed by you (Lecturers, tutorials, Seminars, Practical, etc.):

12. Details of Tutorials during the last academic year:

	Undergraduate	Post-graduate
Number held:		
Assignments checked:		

13. Were you able to meet the classes allotted to you during the last academic year in any of the levels of regularity given below (circle what is applicable):

(a) 90% of 100%

(b) 80% to 90%

(c) 70% to 80%

(d) below 70%

SECTION-II

1. Give details of the following degrees:

	University	Year of Award	Topic of Dissertation
M.Litt.			
M.Phil.			
Ph.D.			
D.Litt.			
D.Sc.			

2. Details of thesis, if published (a copy may be enclosed):

(a) Area of Specialization:

3. Details of published research papers, books, monographs reviews, chapter in books, translations and creative positions held:
4. Participation in conferences, seminars, workshops (give details of the papers presented and/or official positions held):
5. Summer Institutes, refreshers or orientation courses attended. Give details.
6. Details of research guidance/ Professional consultancy, if any:
7. Membership or fellowship of Professional/ Academic Bodies, Societies, etc. Give details.
8. Any other information regarding academic activities not covered under this Section.

SECTION-III

1. Details of your contribution to the corporate life of your Institution.
 - a) Curriculum development
 - b) Cultural/extra-curricular activity
 - c) Sports/community and extension services
 - d) Administrative assignment
 - e) Any other

2. Any other information not covered in the above questionnaire.

I certify that the information given above is correct and factual to the best of my knowledge.

Residential Address:

_____	Signature : _____
_____	Department : _____
_____	Date : _____

Telephone No.: _____

Forwarded. The facts stated above have been verified and found correct.

Place:

Date:

Head of the Department
(Signature with Rubber Stamp)