

## MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956) Grade 'A' Accredited by NAAC Sector-01, Kamothe, Navi Mumbai - 410 209

## **APPLICATION FORM FOR EXAMINERSHIP**

Name of Institution	:			
Name of Person	:			
Name of Department	:			
Date of Birth	:			
E-mail ID	:			
Phone No / Mobile No.	:			
Residential Address	:			
Post Graduate Qualification	:			
Specialty course	:			
Year of Passing	:			
Name of Institute	:			
Whether approved as PG Teacher	:			
If yes, letter no of University	:			
Name of the University	:			
	Post	Date from	Date to	Institute
Details of teaching				
experience starting form lecturer / Asst Prof with				
dates				

Any Academic position held in the University	:
Details if any court case pending / convicted by the court of law / debarred from the University from examination	:
Signature of the applicant	:
Recommendation of professor and	Head of the department
Signature of H.O.D	:
Recommendation of Dean / Directo	or / Principal of the Institute
Signature of Head of Institute	: