**The applicant must adhere to the provided format. The application will be deemed incomplete if the format is followed.**

1. **Total Academic Experience: \_\_\_\_\_\_ Years \_\_\_\_\_ Months**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **University/ Organisation** | **Designation** | **From****(MM-YY)** | **To****(MM-YY)** | **Nature of duties** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

1. **Details of the courses taught**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Course Title** | **Name of Institution** | **Duration** **(MM-YY to MM-YY),****Total number of instruction hours** | **Class Size** | **Level of teaching (UG, PG, Executive Education)** | **Course Feedback [Score obtained/Max score]** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |

1. **Details of FDP/MDP/Training program/Workshops organized**

|  |  |  |
| --- | --- | --- |
| Program Name | Program Details | Response |
| Name of program 1 | *Programme Type (Long Term (>= 50 Hours spanned over at least six months) /Short Term)*  |  |
| *Duration (Number of Days, and Starting and Ending days DD/MM/YYYY)* |  |
| *Clientele (Name of the Company if it is for a single company):*  |  |
| *Sponsored (Client Mooted) or Open (Self Mooted) Programme:* |  |
| *Value of the Programme (Total Revenue or Per Participant Charge per day basis):* |  |
| *Your Role (Coordintor/Cocoordinator/Both):* |  |
| *Number of hours and Topics taught by you:* |  |
| *Participant Feedback (if any)* |  |
| Name of program 2 | *Programme Type (Long Term (>= 50 Hours spanned over at least six months) /Short Term)*  |  |
| *Duration (Number of Days, and Starting and Ending days DD/MM/YYYY)* |  |
| *Clientele (Name of the Company if it is for a single company):*  |  |
| *Sponsored (Client Mooted) or Open (Self Mooted) Programme:* |  |
| *Value of the Programme (Total Revenue or Per Participant Charge per day basis):* |  |
| *Your Role (Coordintor/Cocoordinator/Both):* |  |
| *Number of hours and Topics taught by you:* |  |
| *Participant Feedback (if any)* |  |
|  |  |  |

*Note: Add more rows as required*