

Indian Institute of Management Visakhapatnam

Andhra Bank School of Business Building, Andhra University Campus, Visakhapatnam – 530 003, AP, INDIA
Tel: +91 891 2824 444 | e-mail: facultyrecruit201912@iimv.ac.in

Application Form for Faculty Positions (Ref. No.02/2019 dated December 18, 2019)

Associate Professor Professor Space for photo 2. Area applying for (select one most applicable area only):	1.	Application for the position of: (please tick $\sqrt{\ }$)	
2. Area applying for (select one most applicable area only): Decision Sciences		☐ Associate Professor ☐ Professor	Space for
Decision Sciences Economics & Social Sciences Finance & Accounting Information Systems Marketing Organizational Behaviour & Human Resources Management Production & Operations Management Public Policy Strategy			photo
Gender: Nationality: Marital Status: Gender: Nationality: Marital Status: Gender: Nationality: Marital Status: Category: Strategy Organizational Behaviour & Human Resources Management Public Policy Strategy Str	2.	Area applying for (select one most applicable area only):	
Marketing		☐ Decision Sciences ☐ Economics & Social Sciences	
□ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Management □ Public Policy □ Strategy □ Production & Operations Strategy □ Strategy □ Public Policy □ Strategy □ Strategy □ Management □ Public Policy □ Strategy □ Strategy		\square Finance & Accounting \square Information Systems	
3. Please use the format given below only and provide complete data. Use additional sheets as needed and reference them suitably. All information furnished MUST be based on supporting documentation. 4. All pages of the application and additional sheets/annexure (forming part of the application) must be duly signed, before submission of hardcopy by post/courier. 5. At this stage of application, please DO NOT attach/submit copies of any certificates / supporting documentation. Such proof would be sought ONLY from short-listed applicants. 1. PERSONAL DETAILS Full Name (in capital letters, with surname in the end): Contact Address with PIN/Zip Code: Contact Number: E-mail: Gender: Nationality: Marital Status: Category:		☐ Marketing ☐ Organizational Behaviour & Human Resources Managen	nent
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\square SC \square ST \square OBC \square Differently-abled Person \square EWS \square General			
		SC \square ST \square OBC \square Differently-abled Person \square EWS \square General	

2. EDU	JCATIONAL QUAI	IFICATIONS (in reverse chr	onological o	rder):		
S.No.	Examination	University/ Institution	Main Subjects	Year of Passing	% of Marks or CGPA	Class / Division	Distinctions (if any)
1.	Ph.D.						
2.	Post- Graduation (Master's Degree)						
3.	Professional Qualification (Please specify)						
4.	Graduation (Bachelor's Degree)						
5.	Higher- Secondary Class XII						
6.	Matriculation/ Secondary School/Class X						
3. TOI	PIC OF PhD/ EQUI	VALENT					
4. FUL	L TIME WORK EX	EXPERIENCE (in	reverse chro	nological ord	ler):		
S.No.	Employer	Fro		ce Desi	gnation	Ke	ey Result Areas
S	ummary:						
Т	otal work experie	nce:	years;		months		
		ching / Researc					
	i i	 As Assistan As Associat As Professo Teaching a Teaching a 	te Professor: _ or: year t bachelor's de	years; _ s; mo egree Level: _	month onths years;	is mont	
		ıl <u>Industry</u> exp ıl <u>other</u> experie		-			

5. CO	DURSES T	'AUGHT	(IN THE P	AST F	IVE YEA	ARS)					
S.No	. Institu	tion	Course T			Bachelor's/Doctor		Year	Batch Size	Student Feedbac Rating	
6. IN	INOVATIO	ONS IMP	PLEMENTE	D IN T	EACHI	NG					
7.RF	SEARCH	PAPERS	PUBLISH:	ED IN	THE PA	ST FIVE	YEARS				
S. No.	Journal	ISSN No.	Journal Rank / Category	List / Source	ce for ank /	Title of the Paper	Whether first / sole author? (Yes/No)	No. of authors	Month & Year of Publication	Vol. No.	Issue No.
8. IN	INOVATIO	ONS IMP	PLEMENTE	D IN R	RESEAR	СН					
			THORED IN								
S.No	. Publi	sher	Title	of the	Paper		er first/sole (Yes/No)	1	No. of authors	Month Year of Publica	f

BOOKS / BOOK 0	CHAPTE	RS ETC.					
Title of the Book /	ISBN No.	Authored (or)	Whether first/sole	No. of authors	Publisher	Year of Publication	Year of Latest
Chapter		Edited	author? (Yes/No)				Reprint
	Title of the Book /	Title of the ISBN Book / No.	Book / No. (or)	Title of the Book / No. Authored Whether first/sole Chapter Edited author?	Title of the Book / No. (or) first/ sole authors Chapter Edited author?	Title of the Book / No. (or) first/sole authors Chapter Edited author?	Title of the Book / No. Authored Whether No. of authors Publisher Year of Publication Pu

11. PA	APERS PRESENTED	IN CONFERENCES	/ SEMINARS / CO	LLOQUIA	(IN THE P.	AST FIVE YEA	ARS)
S.No.	Title of the Event	Title of the Paper	Whether first / sole author? (Yes/No)	No. of authors	Month & Year	Organizer	Place
			(103/110)				

12. RI	ESEARCH PR	OJECTS/CONSULT	ANCIES TAKEN U	P IN THE P.	AST FIVE Y	YEARS	
S.No.	Project Title	Whether Principal Investigator / Project Leader? (Yes / No)	Sponsoring / Funding Agency & Value (in INR Million)	Client (If different from Sponsor)	Month/ Year of Award	Month / Year of Completion	Project Outcome

13. DO	OCTORAL GUIDANCE	/ SUPERVISION IN T	HE PAST FIVE YEA	RS		
S.No.	Institution	Name of the Scholar	Year of Registration	Research Topic	Your Role	Whether PhD Awarded

	KECUTIVE EDU N THE PAST FI	CATION PROGRAM	IS /WORKS	HOPS/SEM	IINARS/	CONFERI	ENCES CONDUCT	ΓED
S.No.	Type of Program / Event Conducted	Sponsor / Client (if any)	Theme / Title	Place	From (Date)	To (Date)	No. of Participants / Delegates	Your Role

15. ADMIN	ISTRATIVE EXPE	RIENCE IN	ACADEMIC	INSTITUTIONS	
Institution	Administrative	From	То	Major	Notable Achievements /
	Position Held	(MM/YY)	(MM/YY)	responsibilities	Significant Outcomes

16. AW	ARDS/ REWARDS /	RECOGNITI	ONS / PROFESSIONAL AFFILIATIONS
S.No.	Appointing /	Month &	Brief details of Award / Reward / Recognition etc.
	Nominating /	Year	
	Recognizing Body		

17. Professional References (Three)

- a. <Name, Designation, Organization, E-mail ID, Mobile No.>
- b. < Name, Designation, Organization, E-mail ID, Mobile No.>
- c. <Name, Designation, Organization, E-mail ID, Mobile No.>

18. Statement of Purpose (About 500 words):

19. Any other information you wish to highlight:

20. Declaration:

I hereby declare that all the statements/particulars made/furnished in this application are true, complete and correct to the best of my knowledge and belief. I also fully understand that in the event of any information furnished being found false, incomplete or incorrect at any stage, my application/candidature is liable to be summarily rejected and if I am already appointed, my services are liable to be terminated from the post, without any notice and without prejudice to any other legal/penal action that the Institute may initiate, as deemed fit.

Signature of the applicant
(Name of the applicant)

Date:
Place: