



# IIM

भारतीय प्रबंध संस्थान विशाखपट्टणम

Indian Institute of Management Visakhapatnam

## Indian Institute of Management Visakhapatnam

Andhra Bank School of Business Building, Andhra University Campus, Visakhapatnam – 530 003, AP, INDIA

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### **Application Form for Faculty Positions (Ref. No.01/2020 dated June 11, 2020)**

1. Application for the position of: (please tick <input checked="" type="checkbox"/> ) <input type="checkbox"/> Assistant Professor (Grade-I) <input type="checkbox"/> Associate Professor <input type="checkbox"/> Professor	Space for photo
2. Area applying for ( <i>select one most applicable area only</i> ): <input type="checkbox"/> Decision Sciences <input type="checkbox"/> Economics & Social Sciences <input type="checkbox"/> Entrepreneurship <input type="checkbox"/> Finance & Accounting <input type="checkbox"/> Information Systems <input type="checkbox"/> Marketing <input type="checkbox"/> Organizational Behaviour & Human Resources Management <input type="checkbox"/> Production & Operations Management <input type="checkbox"/> Public Policy <input type="checkbox"/> Strategy	
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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. <u>All</u> 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.	

<b>1. PERSONAL DETAILS</b>		
Full Name (in capital letters, with surname in the end):		
Date of Birth (dd/mm/yyyy):		
Contact Address with PIN/Zip Code:		
Contact Number:	E-mail:	
Gender:	Nationality:	Marital Status:
Category:		
<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Differently-abled Person <input type="checkbox"/> EWS <input type="checkbox"/> General		

2. EDUCATIONAL QUALIFICATIONS (in reverse chronological order):							
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. TOPIC OF PhD/ EQUIVALENT

4. FULL TIME WORK EXPERIENCE (in reverse chronological order):					
S.No.	Employer	Duration of Service		Designation	Key Result Areas
		From (MM/YY)	To (MM/YY)		

Summary:

Total work experience: \_\_\_\_\_ years; \_\_\_\_\_ months

a. Teaching / Research Experience: \_\_\_\_\_ years; \_\_\_\_\_ months

i. As Assistant Professor: \_\_\_\_\_ years; \_\_\_\_\_ months

ii. As Associate Professor: \_\_\_\_\_ years; \_\_\_\_\_ months

iii. As Professor: \_\_\_\_\_ years; \_\_\_\_\_ months

iv. Teaching at bachelor's degree Level: \_\_\_\_\_ years; \_\_\_\_\_ months

v. Teaching at Master's / Doctoral Degree Level: \_\_\_\_\_ years; \_\_\_\_\_ months

b. Total Industry experience: \_\_\_\_\_ years; \_\_\_\_\_ months

c. Total other experience: \_\_\_\_\_ years; \_\_\_\_\_ months.

<b>5. COURSES TAUGHT (IN THE PAST FIVE YEARS)</b>						
S.No.	Institution	Course Title	Level (Bachelor's/ Master's/Doctoral)	Year	Batch Size	Students' Feedback / Rating

<b>6. INNOVATIONS IMPLEMENTED IN TEACHING</b>

<b>7. RESEARCH PAPERS PUBLISHED IN THE PAST FIVE YEARS</b>										
S. No.	Journal	ISSN No.	Journal Rank / Category	List / Source for the Rank / Category	Title of the Paper	Whether first / sole author? (Yes/No)	No. of authors	Month & Year of Publication	Vol. No.	Issue No.

<b>8. INNOVATIONS IMPLEMENTED IN RESEARCH</b>

<b>9. CASE STUDIES AUTHORED IN THE PAST FIVE YEARS</b>					
S.No.	Publisher	Title of the Paper	Whether first/sole author? (Yes/No)	No. of authors	Month & Year of Publication

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

11. PAPERS PRESENTED IN CONFERENCES / SEMINARS / COLLOQUIA (IN THE PAST FIVE YEARS)								
S.No.	Title of the Event	Title of the Paper	Whether first / sole author? (Yes/No)	No. of authors	Month & Year	Organizer	Place	

12. RESEARCH PROJECTS/CONSULTANCIES TAKEN UP IN THE PAST FIVE 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. DOCTORAL GUIDANCE / SUPERVISION IN THE PAST FIVE YEARS							
S.No.	Institution	Name of the Scholar	Year of Registration	Research Topic	Your Role	Whether PhD Awarded	

**14. EXECUTIVE EDUCATION PROGRAMS /WORKSHOPS/SEMINARS/CONFERENCES CONDUCTED (IN THE PAST FIVE YEARS)**

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. ADMINISTRATIVE EXPERIENCE IN ACADEMIC INSTITUTIONS**

Institution	Administrative Position Held	From (MM/YY)	To (MM/YY)	Major responsibilities	Notable Achievements / Significant Outcomes

**16. AWARDS/ REWARDS / RECOGNITIONS / PROFESSIONAL AFFILIATIONS**

S.No.	Appointing / Nominating / Recognizing Body	Month & Year	Brief details of Award / Reward / Recognition etc.

**17. Professional References (Three); At least two out of the three References must be from academic institutions. In case of candidates applying for Assistant Professor or Associate Professor positions, References from academic institutions must be at least at one level higher).**

- 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:

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