



**U.P. Textile Technology Institute, Kanpur**  
(An autonomous institute of U P Govt. and affiliated with Dr. APJAKTU, Lucknow)

**Online Interview for Guest Faculty Position**  
**Session 2024-25**

**(For making a panel of guest faculty members)**

The institute invites the application for the guest faculty in the field of Computer Science. The payment for the remuneration of the teaching assignment will be followed as per Technical Education Department of U.P.Govt.. Presently remuneration per contract hour is Rs. 750/- and maximum up to Rs. 40000/- per month. Essential qualifications are as per AICTE, New Delhi norms. Director reserves the right to terminate services of any candidate at any time without notice. The empanelled guest faculty members will be assigned the teaching load as and when required.

Candidates are required to submit the duly filled application form along with self attested photocopies of the testimonials up to 24.08.2024 either at [upttigfic@gmail.com](mailto:upttigfic@gmail.com) or may send through post to “**The Director, U.P.T.T.I. , 11/208, Souterganj, Kanpur - 208001.** For any query contact incharge guest faculty Dr. Devendra Prasad at +91 9451095544.

<b>Date &amp; Time of Interview</b>	<b>Subject/Branch-Positions</b>	<b>Qualification</b>
<b>Informed through Email or Phone call.</b>	<b>Computer Science-1</b>	<b>As per AICTE norms.</b>

**U P Textile Technology Institute, Kanpur-208001 (UP) INDIA**

**Application Form for Panel of Guest Faculty Position**

**Session-2024-25**

Self Attested Photo

Name of Department/Subject-.....

1.	<b>Name (In Block Letters)</b>	
2.	<b>Date of Birth</b>	
3.	<b>Father's/Husband's Name</b>	
4.	<b>Nationality</b>	
5.	<b>Whether belongs to SC/ST or OBC Category of UP (Yes/No)</b>	<b>(If yes, mention the category and enclose the certificate issued by competent authority)</b>
6.	<b>Address for Correspondence</b>	
7.	<b>Permanent Address</b>	
8.	<b>Phone/ Mobile No.</b>	
9.	<b>Email Address</b>	
10.	<b>Are you physically handicapped? (Yes/No)</b>	<b>(If yes enclose certificate issued by Chief Medical Officer)</b>
11.	<b>Name of State(Domicile) to which candidate belongs</b>	

<b>12. Educational Qualification</b>						
<b>S. No.</b>	<b>Examination Passed</b>	<b>School/College/University</b>	<b>Year of Passing</b>	<b>Subject</b>	<b>Division &amp; % of Marks</b>	<b>Distinction/Gold Medal/Ranks</b>
<b>i</b>	<b>High School</b>					
<b>ii</b>	<b>Intermediate</b>					
<b>iii</b>	<b>Graduate (.....)</b>					
<b>iv</b>	<b>Post Graduate (.....)</b>					
<b>v</b>	<b>Ph.D.</b>					
<b>vi</b>	<b>Others</b>					
<b>Whether NET/GATE qualified: Yes/No</b>						
<b>If yes give details</b>						
<b>13.</b>	<b>Experiences Teaching/Industrial</b>		<b>Teaching(UG Level)</b>			
			<b>Teaching(PG Level)</b>			
			<b>Professional</b>			
			<b>Industry</b>			
			<b>Research</b>			
			<b>Total</b>			
<b>14.</b>	<b>Paper published (write number, details to be attach separately)</b>		<b>International Journal</b>		<b>National Journal</b>	

**14. Appointment held till date in chronological order (may attach separate sheet if required)**

**15. Publications**

**I hereby declare that the entries made in the form are true to the best of my knowledge and belief and if found incorrect/wrong later, I shall be liable to lose my employment at whatever stage it is found.**

**Place-.....**

**Date-.....**

**Signature of Candidate with Name**