GOVERNMENT OF MIZORAM HIGHER & TECHNICAL EDUCATION DEPARTMENT

PROFORMA FOR PROMOTION FROM ______TO

	UNDER CAREER ADVANCEMENT SCHEME (C					
	(To be submitted for consideration for promotion to the next level in Librarian Cad					
	(As per UGC Regulations on Minimum Qualifications for Appointment of Teachers and a Academic Staff in Universities and Colleges and Measures for the Maintenance of Standa in Higher Education, 2018)					
	OVERALL ASSE	ESSMENT PERIOD				
	Name of College/ Institution:					
	PART A: GENERAL INFORMATION	ON AND ACADEMIC BACKGROUND				
1.	Name (in Block Letters)	:				
2.	Father's Name/Mother's Name	:				
3.	Date and Place of Birth	:				
4.	Sex	:				
5.	Marital Status	:				
6.	Nationality	:				
7.	Department	:				
8.	Date of entry into service	:				
9.	Years of teaching experience	:				
10.	Date of last Promotion	:				
11.	Current Designation and Academic Level	:				
12.	Date of eligibility for promotion	:				
13	Category (SC/ST/ORC/PWD/FWS/General)					



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Address:						
Telephone No:						
relephone No.						
Mobile No:		 -				
E-mail ID:						
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Permanent Addre	ss (with Pin Co	ode) if diffe	erent from S1 N	Vo. 14:		
Academic Qualifi Examinations Graduation	cations: Name of Exam	Univers ity	Year of passing	% of marks obtained	Divisio Class/	
	Name of Exam			marks		
Examinations Graduation	Name of Exam			marks		
Examinations Graduation Post-Graduation Other Examinations,	Name of Exam	ity		marks obtained	Class/	Ma Sub

18. Field of Specialization:

Ph.D./D.Phil.

D.Sc./D.Litt.



19. DETAILS OF COURSES/ PROGRAMMES/ WORKSHOP/ MOOCs ATTENDED OR COMPLETED DURING THE ASSESSMENT PERIOD*:

19.1 Details of Training/Seminar/Workshop/Course on automation and digitization/Library upgradation

S1	Details	Place	Period		Sponsoring/Organising
No			From	То	Agency

19.2. MOOCs completed with e-certification:

Sl No	Details of MOOCs (with credit)	Subject	Certification providing agency	Date of certification	Level (UG/PG/ Other)	E- certification no.

20. Period of experience in the Librarian Cadre during the assessment period:

Name of college/	Post held with pay level in	Permanent/	Level	From	То	Total Experience (as on)		
institution	the Pay Matrix			Level (UG/PG) From		Year	Month	Day



21. Period of absence on Leave etc. during the assessment period. (Paid Leaves – refer Appendix II, Table 1 of UGC Regulations, 2018)

On leave (specify type of	Per	riod	Remarks
leave)	From	То	
Others (deputation etc)	Pei	iod	Remarks
Culers (department etc)	From	То	Romano

$\frac{PART\text{-}B\text{: }PERFORMANCE \ ASSESSMENT \ REPORT \ \& \ GRADING \ DURING \ THE}{ASSESSMENT \ PERIOD}$

(Grades claimed by the Applicant)

Sl. No.	Academic Year/ Session	Grade in Part B.1	Grade in Part B.2	Overall Grade
1.				
2.				
3.				
4.				
5.				
6.				



PART-C: OTHER RELEVANT INFORMATION

(a) Membership/Fellowship of Learned bodies/Societies:
(b) Literary, cultural or other activities (e.g. achievement in sports etc.) in which the teacher is interested and distinctions obtained:
(c) Please give details of any other credential, significant contributions, awards received, responsibilities, etc. not mentioned earlier.
(d) Future Plans (In approximately 150 words):
LIST OF ENCLOSURES: (Please attach self-certified copies of certificates, sanction orders, papers, etc. wherever necessary) 1. 2. 3. 4.
PART-D: DECLARATION
I have read the applicable guidelines, which are binding. I do hereby solemnly declare that the information given, the statements made and documents enclosed with this application are correct and true to the best of my knowledge and belief.
Date:
Signature & Designation of the Applicant
We certify that
The particulars given in this proforma have been checked and verified from office records and documents enclosed are found to be correct.
The gradations have been verified on the basis of the performance of the applicant and the

credentials/documents provided and enclosed herewith by the applicant.



(Grades awarded by the Expert)

Sl. No.	Academic Year/ Session	Grade in Part B.1	Grade in Part B.2	Overall Grade
1.				
2.				
3.				
4.				
5.				
6.				

Signature of Expert	Signature of Expert
Signature of Principal	Signature of HOD

NOTE:

1. For the purpose of assessing the grading of various activities at B1 & B2 all such periods of duration which have been spent by the teacher on different kinds of paid leaves such as Maternity Leave, Child Care Leave, Study Leave, Medical Leave, Extraordinary Leave and Deputation shall be excluded from the grading assessment. The teacher shall be assessed for the remaining period of duration and the same shall be extrapolated for the entire period of assessment to arrive at the grading of the teacher. The teacher on such leaves or deputation as mentioned above shall not be put to any disadvantage for promotion under CAS due to his/her absence from his/her teaching responsibilities, subject to the condition that such leave/deputation was undertaken with the prior approval of authority concerned following all procedures laid down in the UGC Regulations, 2018 and as per the acts, statutes and ordinances of the parent institution.



