Institute of Space Technology

 IST-IND-F-02/00

Faculty Application Form

Computer number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(for office use only)

**Post Details:**

Post Applied for :

Photograph

Date of advertisement:

**Discipline/Specialization Details:**

Discipline/Field :

Specialization :

Campus/City

Applied for: **Islamabad:** **Karachi:**

**Personal Information:**

Name : Father’s Name :

Date of Birth : Place of birth :

Age : Religion :

Marital Status : Domicile :

CNIC No : Email Address :

Nationality : Dual Nationality (if any):

Tele No. (Office) : Tele No. (Residence):

Cell No : Additional Cell No:

Relative Cell No (For Emergency): Skype ID:

Postal Address :

Permanent Address:

Date of commission in armed forces (If applicable):

Date of retirement from armed forces (If applicable): SOD: SOS:

 (Date of Struck of Duty) (Date of Struck of Strength)

Date of joining government service (If applicable) :

Date of retirement from government service (If applicable) : SOD: SOS:

 (Date of Struck of Duty) (Date of Struck of Strength)

Date of Leave Preparatory to Retirement (LPR) (If applicable):

Rank / Pay Scale of retirement from Armed Forces / Govt. Service:

Name of Government / Armed Forces Organization:

Last Rank from Govt. / Armed Forces at the time of retirement:

Status of retirement from Govt. / Armed Forces / R&D Organization:

 (a) Voluntary Retirement (Yes/No): (b) Superannuation Retirement (Yes/No):

 (upon attaining 60 years of age)

 Have you ever resigned from the service of any Govt. / Armed Forces / R&D Organization:

 (a) Yes: \_\_\_\_\_\_\_\_(b) No: \_\_\_\_\_\_\_\_ (c): Name of Organization:

 (d) In case your answer is yes, then please mention the reason(s) for your resignation:

 Have you ever been terminated from the service of any Govt. / Armed Forces / R&D Organization:

 (a) Yes: \_\_\_\_\_\_\_\_(b) No: \_\_\_\_\_\_\_\_ (c): Name of Organization:

 (d) In case your answer is yes, then please mention the reason(s) for your termination from service:

**NOTE: (Please attach retirement order if retired from armed forces / government service).**

**Family Details:**

Does any of your family member(s) who is/are dependent on you and/or residing with you, working in foreign mission:

**Yes**   **No**

If yes, then please provide the following details:

(i) Name: (ii) Relationship with you:

(iii) Profession /Occupation: (iv) Country of foreign mission:

(v) Date of joining the foreign mission: (vi) Country of location:

(vii) City of location: (viii) Dual Nationality (if any)

(ix) Tele No: (x) Cell No :

(xi) Additional Cell No. (if any): (xii) Email Address:

(xiii) Address:

**Spouse Details:**

(i) Name: (ii) CNIC No :

(iii) Profession /Occupation: (iv) Religion :

(v) Place of birth: (vi) Nationality :

(vii) Dual Nationality (if any): (viii) Date and place of Marriage:

(ix) Tele No. (Office): (x) Tele No. (Residence):

(xi) Cell No. : (xii) Additional Cell No. (if any):

(xiii) Email Address:

(xiv) Postal Address:

**Education:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Certificate/****Degree** | **Discipline/****Field** | **Duration****of studies** | **School/Board/University** | **From****(d/m/y)** | **To** **(d/m/y)** | **Total****Marks** | **Obtained Marks** | **%** | **Division / CGPA** |
| Matric or Equivalent |  |  |  |  |  |  |  |  |  |
| DAE / F.Sc. |  |  |  |  |  |  |  |  |  |
| BA / BSc / BS / BE with PEC# |  |  |  |  |  |  |  |  |  |
| MA / MSc / MS / MBA  |  |  |  |  |  |  |  |  |  |
| ME / MS / M.Phil |  |  |  |  |  |  |  |  |  |
| PhD |  |  |  |  |  |  |  |  |  |
| Additional (if any) |  |  |  |  |  |  |  |  |  |

**Professional Experience: (Most recent first)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Post** | **Organization / Institution** | **Type of Organization Govt. / Armed Forces / R&D / Semi Govt. / Autonomous / Private** | **From (d/m/y)** | **To (d/m/y)** | **Total no. of years** | **Nature of Work** | **Reason of leaving** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**Teaching Experience: (Most recent first)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Post** | **Organization / Institution** | **Type of Organization Govt. / Armed Forces / R&D / Semi Govt. / Autonomous / Private** | **From (d/m/y)** | **To (d/m/y)** | **Total no. of years** | **Permanent / Contractual/TTS / IPFP / Visiting Faculty**  | **Reason of leaving** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**Research Experience: (Most recent first)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Post** | **Organization / Institution** | **Type of Organization Govt. / Armed Forces / R&D / Semi Govt. / Autonomous / Private** | **From (d/m/y)** | **To (d/m/y)** | **Total no. of years** | **Permanent / Contractual/TTS / IPFP / Visiting Faculty** | **Reason of leaving** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Total Professional Experience :

Total Teaching Experience :

Total Research Experience :

Total Experience (Professional Experience +Teaching Experience + Research Experience) :

**NOTE: (Please attach documentary evidence for each professional / teaching / research experience mentioned in the corresponding tables).**

**Research Publications:** (Mention only those which have been published in HEC recognized journals for Science disciplines i.e.

only W category (Impact Factor) Journals. Attach extra / separate sheets if necessary / required)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Topic** | **Field** | **Journal** | **Journal Citation Report (JCR) Rank number** | **Journal Quality Ranking System (JQRS)****(Gold/Silver/Bronze)** | **Date of Publication** | **Impact Factor** | **Web address** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

Total Research Publications in W category (Impact Factor) Journals :

**Research Publications:** (Mention only those which have been published in journals other than HEC recognized Journals. Attach extra / separate sheets if necessary / required)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Topic** | **Field** | **Journal** | **Date of Publication** | **Web address** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Total Research Publications in journals other than HEC recognized journals :

**International Conference Publications:** (Mention only international conference publications. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Topic** | **Field** | **Conference** | **Country** | **Web address** | **Year** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Total International Conference Publications :

**Local Conference Publications:** (Mention only local conference publications. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Topic** | **Field** | **Conference** | **Country** | **Web address** | **Year** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Total Local Conference Publications :

**MS/PhD Supervision:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **MS/PhD** | **Title /****Topic** | **Discipline /****Field** | **University** | **Principal Supervisor / Co-Supervisor** | **Date**  | **Complete /****In progress** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Total No. of MS theses supervised :

Total No. of PhD theses supervised :

**Patents:** (Mention only those which have already been issued. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Patent No.** | **Title** | **Type** | **Date of Issue** | **Issuing Authority** | **Brief Description / Specification** | **Inventors / Team Members** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Total No. of Patents issued :

**Patents:** (Mention only those which have been applied for but have not been issued yet. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Patent No.** | **Title** | **Type** | **Date of Application** | **Issuing Authority** | **Brief Description / Specification** | **Inventors / Team Members**  | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Total No. of Patents applied but not issued yet :

**International Research Grants:** (Mention only those which have been granted by international organizations / Institutions. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Title of Research** | **Brief Description of Research** | **Benefit (s) of Research** | **Granting Organization / Institution** | **Amount of Research Grant** | **Year** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Total amount of international research grants :

**Local Research Grants:** (Mention only those which have been granted by local organizations / institutions. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Title of Research** | **Brief Description of Research** | **Benefit (s) of Research** | **Granting Organization / Institution** | **Amount of Research Grant** | **Year** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Total amount of local research grants :

**Published Books:** (Mention only those which have been published and completely authored individually. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Title** | **Discipline** | **ISBN No.** | **Publisher** | **Publication Year** | **Rating** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Total no. of published books which have been completely authored individually :

**Published Book Chapters:** (Mention only the book chapters that are included in a published book which has been Co-authored with other authors. Attach extra / separate sheets if necessary / required):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Book Title** | **ISBN No.** | **Discipline** | **Publisher** | **Publication Year** | **Title of book chapter** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |  |

Total no. of published book chapters :

**Training/Courses/Diploma:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Training/Course/****Diploma** | **Field** | **Duration of Training/Course/Diploma** | **Training Institution** | **Year** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Distinctions obtained (if any):**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.** | **Certificate/****Degree in which distinction/****position has been obtained** | **Distinction/****Position obtained** | **Board/ University** | **Institution** | **Year of obtaining distinction/****position** | **Documentary evidence attached (**🗸**/**×**)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Attachments:** Educational Degrees, Transcripts & Mark Sheets (in descending order), Certificates, Experience Certificates, NOC, Discharge Certificate, Release / Retirement Order, Domicile, CNIC, Photograph, Fresh Resume and all supporting documents in respect of the information provided in this Faculty Application Form.

**Miscellaneous:**

* **Next two years goals/plans**

* **Reasons for choosing this job**

**Declaration by applicant:** By signing below, I acknowledge that the above information is true in all respects to the best of my knowledge. Any misinformation would render me ineligible for the induction.

###### Date of Application: Signature of Applicant:

**Undertaking by the HR Dept:**  I have checked the proforma and found that all entries have been properly filled and form is complete.

**For Office Use only:**

###### Signed by Addl Director (HR):

###### C/Signed by Director (HR):