



SHRI SHANKARACHARYA PROFESSIONAL UNIVERSITY

Opposite SSIMS, Junwani, Bhilai (CG)

Phone:- 0788 4088810 / 4088888

APPLICATIONS ARE INVITED FOR THE POST OF THE REGISTRAR AND THE CHIEF FINANCE AND ACCOUNTS OFFICER (2nd Invitation)

Registrar

Date:- 14.12.2024

Qualification:- As per UGC norms.

Period of employment:-

04 years term or 65 year of age, whichever is earlier subject to reappointment for further term.

Chief Finance and Accounts Officer:

Qualification:- Post graduate in any discipline (preferably in commerce/Economics/Business Administration with specialization in Financial / Management) and 10 years of working experience to manage Accounts / Finance independently

Period of employment:-

03 years term or 65 year of age, whichever is earlier subject to reappointment for further term.

- Suitable pay consideration
- University reserves the right not to fill the post advertised, considering the administrative needs.
- Visit www.shrishankaracharyauniversity.com/ for more details about eligibility criteria.
- Those applicants who have applied earlier to our advertisement dated 01.04.2024 need not apply again.
- Apply to the following email id on or before 31.12.2024 followed by submission of hard copies in the prescribed format to the University office. The Application form is available in our website:-
hr@shrishankaracharyauniversity.com

Registrar



Shri Shankaracharya Professional University, Bhilai, CG

Phone No. 0788-04088810, Website: www.shrishankaracharyauniversity.com

Email – hr@shrishankaracharyauniversity.com

Application Form for the Post of Registrar

Passport size
Colored Signed
Photograph

1.	Name in Full (in Capital Letters)						
2.	Father's/Husband's Name						
3.	Mother's Name						
4.	Date of birth (please attach true copy of certificate)		Day		Month		Year
	Age on 31/12/2024		Year		Month		Day
5.	a) Marital Status : Married/Unmarried						
	b) Gender:						
6.	a) Permanent Address	b) Correspondence Address					
	Phone (with STD code): Mobile No.:		E-Mail:				
7.	Nationality						
	Religion						
8.	Were you at any time declared medically unfit; asked to submit your resignation; discharged or dismissed from Govt. / PSU / Autonomous Body or Private Service? If yes, give details in a separate sheet.						

9. Educational Qualification:

(Please attach self-attested photocopies of various Degrees/ Certificates/ Mark sheets):-

S. No.	Qualification Degree/ Certificate	Stream/ Specialization	% marks/ CGPA	Division	Month & Year of Passing	University/ Institution /Board	Remarks (If any)
1	Ph.D.						
2	PG						
3	UG						
4	HSSC (12 th)/ Diploma						
5	SSC (10 th)						

10. Details of Essential Experience:

(a) Details of analogous post:

(Please attach self-attested copies of proof)

Position/Designation	Name of Institution	From	To Till date	Total		Pay & Pay Scale or AGP Indicating level
				Years	Months	

(b) Details of Academic Experience:

Details of experience as Assistant Professor including Associate Professor or comparable experience in research establishment and/or other institutions of higher education.

(Please attach self attested copies of proof)

Position/Designation	Name of Institution	From	To Till date	Total		AGP
				Years	Months	

(c) Details of Administrative Experience:

Administrative experience, of which 8 years shall be as Deputy Registrar or an equivalent post or above.

(Please attach self-attested copies of proof)

Position/Designation	Name of Institution	From	To Till date	Total		AGP
				Years	Months	

11. Desirable Qualification and Experience:

(a) Computerized Administration / Legal / Finance / Establishment matters:

(Please attach self-attested copies of proof)

Position/Designation	Name of Institution	From	To Till date	Total		Pay & Pay Scale or AGP
				Years	Months	

12. Did you previously apply for any post in this Institute? If yes, give particulars:

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DECLARATION

“I hereby declare that I fulfill the eligibility conditions to the post and that the statements made by me in the form are true, complete and correct to the best of my knowledge and belief.”

Place:

Signature of Applicant

Date:

Name.....

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NO OBJECTION CERTIFICATE TO BE FURNISHED BY THE CANDIDATE WHO IS ALREADY IN EMPLOYMENT, REGULAR/TEMPORARY BASIS.

Certified that Dr./Mr/Ms.....Son/Daughter of Shri..... is a permanent/temporary/ adhoc employee of the department / institution /organization since The Department / Institution/ Organization has no objection if he/she is appointed in Shri Shankaracharya Professional University, Bhilai against the posts advertised by the SSPU dated 15.12.2024

Signature with seal

Place.....

Date.....

.....



Shri Shankaracharya Professional University, Bhilai, CG

Phone No. 0788-04088810, Website: www.shrishankaracharyauniversity.com

Email – hr@shrishankaracharyauniversity.com

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Check list for Registrar Post

Name of the Applicant :

Gender :

Mobile Number :

Details of Application Fee :

S. No.	Particulars	√ / X / NA	Page No.
1.	Matriculation/10th Standard/ Secondary or equivalent certificate		
2.	Higher Secondary / Class XII (or equivalent) board marks sheet.		
3.	Degree certificate along with mark sheets pertaining to all the academic years as proof of educational qualification claimed.		
4.	Proof of analogous post (if applicable).		
5.	Proof of 15 year's experience as Assistant Professor in the AGP of Rs. 7000/- and above or with 8 years of service in the AGP of Rs. 8000/- and above including as Associate Professor along with 3 years experience in educational administration (if applicable), or Comparable experience in research establishment and/or other institutions of higher education.		
	Proof of AGP(s)		
	Proof of experience in educational administration or Comparable experience		
6.	Proof of 15 years of administrative experience, of which 8 years shall be as Deputy Registrar or an equivalent post or above (if applicable).		
	Proof of AGP		
	Proof of administrative experience		
7.	Proof of Desirable Qualification (if any).		
8.	Proof of Desirable Experience (if any).		
9.	Photo identity card [issued by govt. agency/last attended Institution/University]		
10.	NOC and Experience Certificate(s) from the Head(s) of Organization(s) for the entire experience claimed		

Place:.....

Date:.....

Signature of Applicant

Name.....