School of Engineering and Technology

HNB Garhwal (A Central) University, Srinagar, Uttarakhand, India-246174.

Ref. No.: HNBGU/SOET/2026/250

Date: 12-11-2026

NOTICE

हेमवती नन्दन बहुगुणा गढ़वाल विश्वविद्यालय द्वारा सत्र 2026–27 हेतु अंशकालिक/अस्थाई अतिथि शिक्षकों की सेवाएं ली जानी है। जिसके तहत स्कूल ऑफ इंजीनियरिंग एण्ड टैक्नोलॉजी के अर्न्तगत इलैक्ट्रॉनिक्स एवं कम्यूनिकेशन इंजीनियरिंग में एक (01) अतिथि शिक्षक की नियुक्ति हेतु आवेदन पत्र आमंत्रित किये जाते है। अतः इच्छुक एवं योग्य अभ्यर्थी निर्धारित निम्न प्रारूप में दिनांक 18/11/2026 को सायं 5 बजे तक अपना आवेदन पत्र भरकर विभाग में जमा करें **अथवा** विभाग की ई–मेल ***hod.ece.hnbgu@gmail.com*** में भेज दें।

12/11/2026

संकायाध्यक्ष,

स्कूल ऑफ इंजीनियरिंग एण्ड टैक्नोलॉजी,

हे0न0ब0 गढ़वाल (केन्द्रीय विश्वविद्यालय) विश्वविद्यालय,

श्रीनगर गढ़वाल, उत्तराखण्ड।

DEAN
School of Engineering and Technology
HNB Garhwal University
(A Central University)
Srinagar (Garhwal) Uttarakhand

Hemvati Nandan Bahuguna Garhwal University, Srinagar (Garhwal), Uttarakhand – 246 174
(A Central University)

APPLICATION FORM FOR THE ENGANGEMENT OF GUEST FACULTY FOR THE SESSION 2026-27.

1. Name of the Applicant:
2. Name of the Deptt./Course/ Center:
3. Date of Birth:
4. Category: GEN SC ST OBC PH
5. Address for Correspondence and Email ID of the candidates
6. Contact No. : Mob Landline with STD Code:
7. Educational Qualifications:

Class	Year	Subject	Name of the University	Total marks	%	Division
10th Class/ Equivalent						
12th Class/ Equivalent						
Bachelor's Degree						
Master's Degree						
M.Phil/Equivalent						
Ph.D.						
NET UGC / CSIR/ Any other Exam passed equivalent to NET (SLET/SET etc.)						
Title of the Thesis						
Whether Ph.D. has been awarded as per UGC regulations 2009.						

8. Experience of Teaching/ Research

Total Period of Experience (Please ensure that the period of Teaching & Research experiences claimed do not overlap)

Under Graduation Level			**Post-Doctoral: Teaching/ Research**		Publications
No of Years	No of Months		No of Years	No of Months	
Graduation Level			**Research Experience**		
No of Years	No of Months		No of Years	No of Months	
Post Graduation Level			**Other Experience, if any**		
No of Years	No of Months		No of Years	No of Months	

Declaration:

I_____-_____ Son/Daughter of _____ hereby declare that all the statements and entries made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after my engagement as Guest Faculty, my candidature/ engagement may be cancelled by the University.

Date:

Signature of the Applicant

Name (in block letters):

(Application not signed by the candidate liable to be rejected.)