

KANNUR UNIVERSITY
(School of Distance Education)

Application to include in the panel of teachers to engage classes for courses offered by the SDE, Kannur University.

1. Name (in Block Letters) :
2. Address for communication :
3. Phone Number : Land : Mob :
4. Date of Birth :
5. Qualifications :
6. Whether Qualified NET, SET, JRF :
etc.(specify the details)
7. Teaching Experience at College
Level(if any) : years months

8. Preference of papers
Willing to prepare lessons
(specify name of paper)

Name of course	Name of paper
UG course only	1. 2. 3. 4. 5.
PG course only	1. 2. 3. 4. 5.
Both UG & PG course	1. 2. 3. 4. 5.

9. Give preference of paper, willing to
teach (Specify the Name of Paper &
course) (Specialized)

- : i)
ii)
iii)
iv)
v)

10. Contact class centre preferred
(Districts : Kannur/Kasaragod/
Wayanad)

- : i)
ii)
iii)

DECLARATION

I hereby declare that the details furnished
above are correct and true to the best of my knowledge.

Place :
Date :

Name & Signature